

NEWS

 | FOR EMERGENCY SERVICE ORGANIZATIONS

9 LESSONS YOUR ESO DOESN'T HAVE TO LEARN THE HARD WAY

Challenges other emergency service organizations (ESOs) have faced—and how you can help avoid them.

Your crew faces unique health, safety and reputational risks during daily operations. But it's all too easy to become desensitized to certain hazards when we face them each day. That's why it's important to not only train for the "big" events that make national news—like active shooter situations, natural disasters

and massive blazes—but also to focus on everyday risks that might be overlooked if your members are on auto-pilot. We're sharing a few challenges that too many other emergency service organizations have recently faced and providing tips to help your team prevent them from impacting operations.

DID YOU HEAR?

VFIS University got a makeover!

Check out our updated user experience, get access to specialized emergency services courses 24/7, learn at your own pace and expand your skillsets today. Plus, more updates coming soon!



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Auto incidents drive claims for VFIS clients—here are 3 that you can work to prevent:

FIXED OBJECT STRIKES

Parked vehicles, trees, poles or equipment laying on the ground may not seem like significant risks at first glance—but the amount of emergency vehicles experiencing collisions with stationary objects cannot be overemphasized. In fact, these incidents are the #1 insurance claim of VFIS clients!

While these incidents typically occur at a low speed and result in minimal damage, they can still leave your organization without a vehicle and with a hefty bill. Even worse, fixed object strikes and close calls are often swept under the rug, which leaves the root-causes of these

incidents unaddressed (like skipping pre-driving hazard checks) and could lead to severe—or even deadly—consequences.

You can help reduce your risks by using a spotter during any circumstance where an emergency vehicle is forced to maneuver in an area with reduced clearance. If a spotter is not available—drivers should conduct a circle of safety (at minimum) which includes a full walk-around of the vehicle to check for hazards at the front, back and sides, as well as for any obstructions overhead or underneath. And, of course, drivers should proceed slowly and stop at any point if there are any doubts about safety.

BACKING MISHAPS

Like fixed object strikes, most backing incidents typically result in minor damages. But it's important to remember that your organization is never immune to experiencing the most severe consequences



of any operational risk. In fact, the Emergency Responder Safety Institute reports that there have been several firefighter fatalities over the last three years resulting from being struck by backing emergency vehicles, particularly fire apparatus.

That's why it's vital to have backing standard operating guidelines (SOGs) and training guidelines in place and to investigate every backing incident and near-miss event to look for underlying issues (like missing protocol for spotters and drivers). Some backing best practices to consider are focusing specifically on maneuvering in reverse during your emergency vehicle driver training (including practicing policies like giving a two-blast horn warning prior to backing), utilizing spotters and spotter-specific policies (like obtaining verbal agreement between the driver and spotter prior to backing), adopting standardized hand signals and verbal commands, backing with the windows completely down and having drivers stop immediately if any point they cannot see or hear their spotter.

INTERSECTION COLLISIONS

Intersections are considered the location that's responsible for the majority of incidents involving emergency vehicles for VFIS clients—and they're also typically home to serious events involving T-bone or off-set types of collisions that result in personal injury and/or significant vehicle damages. Your ESO can help reduce your risks by having SOPs and SOGs in place that cover topics, like operating at intersections, coming to a complete stop at every intersection, clearing intersections and lanes of travel (including accounting for the far curb lane)—and training on these standards often.

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Object Strikes,
Intersection + Safe
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3 risks that could impact your most important asset—your crew.

JUNIOR MEMBER PROGRAMS

Encouraging young people to participate in junior member programs is an excellent way to generate interest in emergency services—and often members continue their service into adulthood, making it an excellent recruitment tool. Unfortunately, as you may have seen in the news, several situations have developed where adult advisors have violated the trust of their organization and caused injury or harm to minor members.

It's vital to have junior member safeguards in place, including safety policies, ethics training, knowledge and adherence of child labor laws, rules of participation, written guidelines and enforcement of those policies to help protect everyone in your organization. Some best

practices for these safeguards include having conduct-related policies (including minimizing one-on-one contact between adults and youth and provisions involving age and gender mix for both junior members and adults), performing criminal background checks for program advisors, hosting regular sexual harassment trainings and utilizing safe and confidential reporting systems.

MANAGEMENT LIABILITY

Moving up in rank within your ESO is exciting—but with retirements flooding some agencies, promotions can happen before you're fully aware of all of the responsibilities involved and understand the true gravity of being a mid-level manager. While the operational risks of inexperienced supervisors may be obvious, our claims data shows that breaks in communication at the mid-level manager area could lead to legal issues for your organization.

You can help set new supervisors up for success by providing them with dedicated training that covers organizational goals (including your mission statement) and position-focused expectations (like updating and distributing SOGs)—as well as encouraging them to ask for help from more experienced members when needed and to fully assume their new leadership role (as it can be difficult for some to make the transition from someone's 'buddy' to their 'lieutenant').

If your ESO has had rapid promotions to the mid-level management level and/or if changes in leadership are impacting the culture of safety in your organization—we can help! Please reach out to your insurance agent or our team at inquiries@vfis.com to learn more.

IMPLICIT AND EXPLICIT BIASES

A bias refers to an idea that you may have about someone or something—and they can impact how you interact with certain groups of people. Biases can have both positive and negative connotations—and implicit (or unconscious) biases occur spontaneously without intent, whereas explicit (or conscious) biases are done intentionally.

We all have biases. But if they impact how an emergency responder reacts to calls and continue to go unaddressed, ignored or unrecognized—they can lead to serious consequences. For example, if an EMS provider has an unconscious bias toward a patient because of their race, weight, age, disabilities, sex and gender, sexual identity, geographic location, socioeconomic status or education level—that bias could impact the level of support they provide and lead to unsound decision making, lapses in patient care, lawsuits or worse.

For example, research by the Oregon Health and Science University and Oregon Institute of Technology found that EMTs and paramedics that participated in their study were 40% less likely to give black patients pain medication than white patients. The researchers also noted that outright discrimination by EMS providers is rare (and illegal) and that they believed this was a case of unconscious biases at work.

“While we'd all like to think we're above unconscious bias impacting our jobs—it's important to regularly watch for biases within yourself and your team...”



While we'd all like to think we're above unconscious bias impacting our jobs—it's important to regularly watch for biases within yourself and your team, be aware that they could impact your work and actively work to overcome them (like through taking an unconscious bias course).

These 3 technology-related risks are no longer on the horizon—they're here.

ELECTRIC VEHICLE FIRES

The concentration of hybrid and electric vehicles (EVs) is rising across the nation—with the International Energy Agency reporting that sales of EVs doubled from 2020 to 2021 alone. These vehicles pose new risks to responders—and if your crew hasn't responded to your first EV fire yet, the time is likely coming soon.

According to the NFPA, potential risks of EV fires for responders include: stranded energy, unexpected silent movement, toxic and flammable gases emanating from a damaged high voltage battery, thermal runaway, battery fires, charging station fires and the possibility of electric shock through exposed high voltage wires and components.

The NFPA notes that while the U.S. Department of Transportation has determined that hybrid and EV technology is not inherently more dangerous to emergency responders, the National Transportation Safety Board reports that firefighters are at significant risk due to a lack of understanding of EV fires.

The good news is that this isn't the first time your department has had to train for something new—and you can actively work to help mitigate your risks and prepare your team

by finding specialized educational opportunities (like those available at nfpa.org/ev) and training on best practices.

Here are a few EV fire incident recommendations from the IAFC:

- Protect your work area and team through established department policies (like wearing full PPE and SCBA with face-piece).
- If needed, use a thermal imaging camera to help size-up the fire and decide if it's better to take an offensive or defensive approach. (As it might be best to let it burn.)
- If it's safe, try to ensure that the vehicle is in park and turned off (possibly chocking the wheels)—and never assume it is powered off or won't move just because it's silent.
- The best method for managing or controlling a battery fire is with water, specifically a large, continuous and sustainable water supply from one or more fire hydrants or multiple water tenders.
- After the contents of the fire are extinguished, you may need to continue sustained suppression and cool the battery pack using water.
- Batteries should always be treated as energized! Monitor their heat, beware of possible secondary ignition and never make contact with any high voltage components.

ADDITIONAL LITHIUM-ION BATTERY RISKS

Lithium-ion (Li-ion) batteries are rechargeable batteries that are commonly used in EVs, laptops, cellphones, lawn mowers, power



tools and electric mobility devices like scooters and bikes—and if these batteries are not stored, used or disposed of correctly, they can overheat, catch fire or explode.

Remember the giant spike in hoverboard fires in 2017? Yup—that was the work of Li-ion batteries. And with the rise of electric mobility device services in large cities, like the ability to rent an e-bike for a half-hour, many fire departments and city officials are becoming all too aware of the severe risks of these devices as well—like the five-alarm fire that started from an e-bike and destroyed a Bronx supermarket, making national headlines in March.

After the fire, the FDNY, NYC Mayor Eric Adams and Fire Commissioner Laura Kavanagh worked together to create a video to help explain the fire risks of these devices (detailing that they get very hot, very quickly and that they're unpredictable) and teach

“ I think that sometimes when we say that they ‘catch fire’, it almost underestimates what’s really happening...

their community members how to help protect themselves. One of the particular risks they touch upon is that many people keep these devices in their lobbies or near doorways—which blocks their emergency exit should a fire occur.

“I think that sometimes when we say that they ‘catch fire’, it almost underestimates what’s really happening. Because they’re really exploding. It would be nearly impossible both for [firefighters] to get in but also for the occupants to get out. So, I think letting people know



that—how much fire happens—is really essential,” Kavanagh explained in the video.

Whether or not your local community has commonly adopted the use of electric mobility devices—the risks of Li-ion batteries are still prevalent in most households across the country. Here are some best practices that the FDNY shares (on fdnysmart.org) to consider sharing in your community:

- Check the battery-operated items you purchase or rent for an Underwriters Laboratories (UL) mark to show that they’ve been safety tested.
- Always follow the manufacturer’s instructions for using, charging and storing your devices—including using the manufacturer’s cords and power adapters.
- Don’t charge your cellphone (and any other devices) under your pillow, on your bed or on a couch.
- Keep batteries and devices at room temperature—and away from direct sunlight and anything flammable.
- If a battery overheats or you notice an odor, change in shape/ color, leaking or odd noises—stop using them immediately. If safe to do so, move the device away from anything flammable and call 9-1-1.

CYBERSECURITY

You may do a double-take to ensure you locked your station—but do you think twice about opening an attachment in an email? Emergency services is a critical infrastructure sector—meaning that your assets, systems and networks are key resources for your community and, unfortunately, that makes you a

Get more cyber safety considerations for ESOs



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prime target for ransomware attacks and other targeted cybersecurity threats.

Not only could this impact your organization and your data—but it could put your community's safety at risk. For example, a ransomware attack targeted and took down an entire city's computer-assisted dispatch (CAD) system, which supports their 911 emergency dispatch and 311 non-emergency phone systems!

So, if you haven't already, it's time to put a cybersecurity program in place that includes developing policies and procedures on computer, technology and Wi-Fi use, minimizing your vulnerabilities through cybersecurity safeguards and continually educating your team on new risks and best practices (like how to spot phishing emails, which are malicious messages that pretend to come from trusted people or entities).

As the Cybersecurity Infrastructure Security Agency (CISA) reports, 90% of all cyberattacks start with phishing—but you can help protect your data today by sharing these email red flags with your team:

- Email comes from an unknown sender (or the email sender looks familiar—but at second glance there's actually an error in spelling, like Amazon vs Amazone)
- Email requests personal or financial information

- Email wants the you to respond immediately or makes an urgent request for information (like upsetting or exciting statements asking you to act fast)
- Email wants you to open an attachment or click a link unexpectedly (tip: if you hover your mouse over a link, you can see which website the link is actually sending you to)

As a leading insurance provider for emergency organizations—we have a front row seat to your not-so-good days (and, unfortunately, your absolute worst days too). It's our goal to not only help provide protections for those moments—but to serve as an advocate and helpful resource for your team so that you have less bad days all together. It's our hope that little tips like these go a long way and, most importantly, that everyone in your organization gets home safely each day.

RECENT + UPCOMING EPISODES ON THE **DON'T RISK IT!** PODCAST **YOU DON'T WANT TO MISS!**



PSYCHIATRIC TRANSPORT VEHICLES WITH JERRY SCHRAMM

An ambulance and crew performing a long-distance transport of a psychiatric patient may not be the most efficient use of an ESO's resources. As an alternative, non-emergent psychiatric transport vehicles can be a safe and efficient way to transfer these individuals, requiring lower operating costs and less manpower.

BACKING BEST PRACTICES

Backing into stations or fixed objects is one of the most common types of claims we see in the VFIS program. Having a Backing Policy in place gives members and volunteers an understanding of management's expectations when it comes to backing. In this conversation with members of the VFIS Client Risk Solutions team, we discuss some best practices to consider when developing a backing policy.

HOSE SECUREMENT BEST PRACTICES

PEDIATRIC INJURY PREVENTION

RECRUITMENT & RETENTION

PEER SUPPORT

NON-MEMBERS IN DEPARTMENT APPARATUS

GROUNDING BEST PRACTICES

ROLLOVER PREVENTION

SCAN TO
LISTEN NOW!



STATION CONVERSATION: WHAT'S TRENDING IN FIRE + EMS



Here's a round-up of 4 new-and-evolving topics in emergency services—and reasons why you may want to pay attention to them.

Liquid Biopsies: A bright future for cancer diagnosis?

Imagine that determining your cancer risk was as simple as having a paramedic on your team take an hour to collect blood samples from all members and reporting back within the week... Although that's currently too good to be true, it seems like science could be getting us there!

A liquid biopsy is a newer procedure that can detect signs of cancerous tumors in the bloodstream—making it a potentially noninvasive (performed through a simple blood draw), quick (with results in around 7-10 days says the American Society of Clinical Oncology) and cost-effective way to detect and monitor tumors.

“Liquid biopsy tests are an active area of research and development because of their potential to help providers diagnose and monitor cancer with a simple blood test. Research is underway to develop liquid biopsy tests that can do things traditional biopsy procedures can't do, like detect cancer before a tumor has formed. Still, more research is needed to understand the potential uses of liquid biopsy,” explains Cleveland Clinic.

There are currently a few kinds of liquid biopsy tests approved by the FDA and they can be used to: predict the likely outcome for people with metastatic breast, prostate or colon cancer, detect a mutation on the EGFR gene that's common in non-small cell lung cancer (NSCLC) and detect circulating tumor DNA in the bloodstream.

While liquid biopsies have proven to be effective in some instances, traditional biopsies (where a sample of tissues/cells from the body is removed and tested) are still considered the “gold standard” for diagnosing cancer—as there's currently not a 100% guarantee that the signs of a tumor will be detectable in a single blood sample.

Even so, eventual advances in cancer detection could save lives—including those of firefighters, who the CDC and National Institute for Occupational Health and Safety report have a 9% higher risk of being diagnosed with cancer and 14% higher risk of dying from cancer than the general U.S. population. Hopefully, additional FDA-approved ways to use liquid biopsies will be here soon, as the American Society of Clinical Oncology notes

there are currently studies to see how liquid biopsies could be utilized to: detect cancer in reoccurring cancer patients, detect the early stages of cancer, detect cancers that do not have routine screen tools and monitor tumor status.

In the meantime, you can continue to help your firefighters prevent and detect cancer by following mitigation best practices (like wearing SCBA in both active and post fire environments), having a comprehensive wellness program that addresses cancer and following NFPA guidelines for annual physicals.

Moral Injuries: Maybe it's not PTSD?

The Firefighter Behavioral Health Alliance released a new white paper in February 2023, *Wounds of the Spirit: Moral Injury in Firefighters*, which discusses what Moral Injuries are, why they're relevant in fire and EMS, as well as what we know about them from a survey of almost 500 firefighters.

Moral Injuries, which can be shortened to “MI” and is a relatively new term, occur when someone perpetrates, witnesses or fails to prevent actions that typically go against their moral

compass. Here are two examples of MI from the paper:

"A fire crew on a hose line is instructed to evacuate and go defensive, but the primary search team has not yet confirmed whether there are victims/patients in the structure. The Lieutenant, who is with a rookie firefighter on the hose line, disagrees with the call and feels conflicted."

"A paramedic is directed by a supervisor to provide treatment to a patient that goes against what she believes to be medically appropriate. She feels betrayed by management."

Depending on how situations like this end and how you respond—it's easy to see how they could have an impact on your mental, spiritual or behavioral health. The Firefighter Behavioral Health Alliance notes that while the signs and symptoms of MI can mirror PTSD, including re-experiencing

events and avoidant behaviors, PTSD is typically grounded in fear whereas MI is usually rooted in emotions and beliefs.

According to their survey results, 57.6% of firefighters reported having experienced a major Morally Injurious Event—with relevant situations, including "mass shootings, car accidents, injured children, evidence of abuse and their own failure to call out colleagues for making mistakes on the job."

You can read the entire paper on the Firefighter Behavioral Health Alliance's website (ffbha.org) and stay tuned for their follow up paper, which will discuss best practices for treating MI.

Monoclonal Antibodies: Could this be the next big EMS service?

Monoclonal antibodies (also called mAbs or moAbs) are lab-made antibodies that are typically administered through an IV solution injected into a vein—and they're designed to seek out specific antigens in the body (aka foreign materials) and destroy them (essentially stimulating a very targeted immune response).

Cleveland Clinic says that the first monoclonal antibody drug was approved by the FDA in 1986 and the use of these therapies has continued to rise since then—including for treatment of cancer, organ transplant rejection, inflammatory and autoimmune disorders (like allergies), osteoporosis, eye conditions, migraines, high cholesterol and nervous system disorders.

Monoclonal antibodies recently gained much of the general public's attention for its use to help neutralize

the COVID-19 virus and prevent progression of the disease. Your EMS providers may have even helped to administer these treatments—as EMS agencies across the country have gained authorization via their state or other administrative practices to provide COVID monoclonal antibody infusions for those who test positive, are considered high risk for progression to severe disease or death and meet other criteria as determined by the governing body that has jurisdiction (like having limited mobility). These agencies have been given specific health protocol by the NHTSA's Office of EMS to help protect both providers and patients including details on who is eligible for care, how to administer the treatment, drug storage and handling, adverse reactions to look for and equipment needed (like PPE).

With the popularity of Mobile Integrated Healthcare—Community Paramedicine (MIH-CP) models, which focus on providing patient-centered healthcare using mobile resources in the out-of-hospital environment, some EMS agencies are wondering if the use of monoclonal antibodies to treat COVID and other conditions may be their next opportunity to offer unique care services within their communities.

Reducing PFAS Levels: A new case for donating blood?

Perfluoroalkyl and polyfluoroalkyl substances (PFAS) are chemicals associated with a range of adverse health outcomes. According to the U.S. Fire Administration, firefighters are at a higher risk of increased PFAS levels because of their exposure to these chemicals from sources like specific firefighting foams, water-resistance protective gear and household products burning in fires.



American firefighters aren't the only ones facing this risk. Studies in Australia showed that firefighters who were exposed to fighting foams had higher levels of PFAS in their blood samples compared to the general population. This led Fire Rescue Victoria to fund a study to see if blood and plasma donations could possibly impact PFAS levels in blood—and the results may interest you.

The randomized clinical trial was published by *JAMA Network Open*, an international peer-reviewed medical journal, and included a study of almost 300 firefighters who had baseline PFAS levels of at least 5 ng/mL before starting the study. A third of the firefighters were assigned to donate plasma every 6 weeks for 12 months, another third were assigned to donate blood every 12 weeks for 12 months and the final third did not donate plasma or blood during the 12-month time period.

Firefighters who were exposed to fighting foams had higher levels of PFAS in their blood samples...

Sure enough, the results of the study indicated that both regular plasma and blood donation resulted in a significant reduction of PFAS levels in blood serum! (With the plasma group reducing their levels the quickest—however, it's undetermined if that's because of what they donated or how often they donated.)

If you're wondering about the recipients of blood containing PFAS—you're not alone. The authors of the study suggest that blood authorities continue to monitor the effects of PFAS and consider the implications of

PFAS in blood donors. However, the Lifeblood division of the Australian Red Cross Society does not have any specific restrictions for donations based on PFAS levels and they state that, "studies overseas have shown wide variations in PFOS and PFOA levels in donated blood among the general population and higher levels have not been shown to have adverse outcomes in blood recipients."

Now, researchers at the University of Arizona Health Sciences are conducting a similar study to see if firefighters in the U.S. have similar results and, if so, they plan to expand upon that research to see what reducing the levels of PFAS in the bloodstream could mean for firefighters.

This is just the beginning for these emerging topics—stay tuned!



PROVIDING MEANINGFUL SUPPORT TO YOUR FIREFIGHTERS AND THEIR FAMILIES

Being an emergency responder—or loving one—isn't easy. Between the physical dangers, emotional stress, exposure to trauma, long shifts, holiday hours and feelings of “being under a microscope”—you face very unique relationship challenges as a result of your career or volunteerism that others will simply never understand. But you also know better than anyone else how important it is to have a support system when you're in this industry—and that there are days when that support makes all of the difference.

Your fire department can help support your members and their personal relationships by:

1. Having open conversations about the relationship challenges you and your loved ones face.
2. Sharing how others have learned to cope and develop healthy relationships in spite of those challenges.
3. Planning gatherings for your team and their families to spend time together, talk about the demands of the job and communicate updates that could impact families (like upcoming commitments, shift changes and other organizational updates).

4. Sharing online groups, blogs and resources that are dedicated to supporting and empowering emergency responders' families, like firefighterwife.com.
5. Having a culture that shows appreciation for the commitment of members and their families.
6. Providing an assistance program to your members and their families with help from true behavioral health experts—and encouraging everyone to utilize those services to help better themselves and their relationships.

Wondering what types of assistance programs are available for your firefighters and their families?

VFIS is proud to offer a Member Family Assistance Program (MFAP) as an add-on to our Accident & Sickness (A&S) Policy. This program supports the health and wellness of first responder employees, volunteers and the workplace and provides services to help enable personnel to resolve personal and work-related issues to maintain individual productivity, health and wellness.

Our Member Family Assistance Program gives employees, volunteers

**Only \$12
per member
per year!**

and their immediate family access to a holistic wellness solution for less than \$12 a member for the year!

Highlights of VFIS' MFAP include:

- Trained professionals who are experienced in counseling emergency service personnel
- Support services that are simple to use and available 24/7
- Treatment for a full-range of personal or work-related issues including addiction, substance abuse, child development and adolescent issues, aging and caregiving, anger management, depression, anxiety and more
- Lifestyle and Specialty Coaching for childcare and parenting, new parents, elder and family care, financial advisory, legal advisory and relationship solutions
- Health Coaching focused on nutrition, wellness and smoking cessation



- Career Coaching including development services, pre-retirement planning services and shift-worker support services
- Online Services like e-learning opportunities and health risk assessments

How to get MFAP for your firefighters:

While MFAP is a highlighted offering of our A&S coverage, the main purpose of A&S is to provide benefits to emergency responders and their families to help lessen the financial impacts of potential accidents, sicknesses and line of duty deaths.

This product is specifically designed to fill in the gaps of traditional Workers' Compensation policies, which don't typically address the unique needs of emergency responders like pre-existing conditions, limits for heart conditions, junior members and auxiliary members.

If you're interested in adding A&S with MFAP to your VFIS policy, or if you're already an A&S client and you'd like to add MFAP for less than \$12 per member per year, reach out to your insurance agent to learn more and get coverage—we'd love to partner with them to help provide more meaningful benefits to your members.



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