

NIOSH Fire Fighter Fatality Investigation and Prevention Program

Stakeholder Meeting
March 22, 2006



On-duty Fire Fighter Fatalities by Year, 1977-2005



Source: USFA,

* Excluding 344 deaths at WTC

Outline

- Congressional mandate & Goals
- Investigation procedures
- Heart disease and fire fighting
- Findings & recommendations
- Dissemination & outreach efforts
- Research & evaluation
- Input for program direction

NIOSH Fire Fighter Fatality Investigation and Prevention Program

Thomas Hales, MD, MPH
Stakeholder Meeting
March 22, 2006




Outline



- Congressional mandate & Goals
- Investigation procedures
- Heart disease and fire fighting
- Findings & Recommendations

Congressional mandate to NIOSH



- Conduct fatality investigations to...
- “identify causal factors common to fire fighter fatalities,
- provide recommendations to prevent similar incidents,
- formulate strategies for effective intervention, and
- evaluate the effectiveness of those interventions.”

Goals & Objectives

Goal

- Prevent fatalities

Objectives

- Investigations
- Identify causal factors
- Recommendations
- Interventions
- Evaluation

FF Program Organization



- SCBA Investigations
- Illness Investigations
- Yon Hales
- Richard Braddee
- Lynn Beth
- Tom Baldwin
- Kim Grayel
- Scott Jackson
- Steve Berardinelli Jr
- Virginia Lutz
- Tim Merinar
- Matt Bowyer
- Steve Proudfoot
- John Sines

Investigation Procedures

- USFA Notification
 - Definition: “any injury or illness sustained while on duty that proves fatal.”
 - CVD Criteria:
 - Symptoms c/w heart attack < 24hrs
 - Fire fighting duties
 - Revised CVD Criteria:
 - Heart attack or Stroke < 24 hrs
 - Non-routine stressful or strenuous physical activity

Investigation Procedures

- Telephone contact
 - FD
 - Local Union
 - State Fire Marshal
- Prioritize



Investigation Procedures

- Site Visit
 - Interviews
 - Review records:
 - Fire Department
 - Medical
 - Family



Investigation Reports

- Circumstances
- Recommendations
- Disseminated





Death in the line of duty...

Death in the line of duty...

Summary of a NIOSH fire fighter fatality investigation November 7, 2003

Fire Chief Suffers Sudden Cardiac Death While Returning to the Fire Station After a Structure Fire – Georgia

SUMMARY

On December 11, 2004, a 36-year-old male career Fire Chief responded for three fire calls. In the first two incidents and one commercial fire, after the last fire, the Chief returned to the scene to “check out” the water. As he was driving the rescue truck back to the fire station, he suddenly collapsed. The truck left the roadway, struck a culvert, and came to a stop. Witnesses called 911 and removed the Chief from the truck. Despite cardiopulmonary resuscitation (CPR) and advanced life support (ALS) performed by firemen, crew members, ambulance crew members, and hospital emergency department (ED) personnel, the Chief died. The death certificate, completed by the Deputy Coroner, listed “cardiovascular arrest” and “a” “SVCVT” (arrhythmically cardiorespiratory distress) as the cause of death. No autopsy was performed. The NIOSH investigator conducted the physical stress of responding to three structure fires, assisting with one emergency scene, and the Chief’s underlying arrhythmically cardiorespiratory distress all contributed to his sudden cardiac death.

NIOSH investigators offer the following recommendations to prevent similar incidents or to address general safety and health issues:

Provide pre-placement and annual medical fitness tests to all fire fighters to determine their ability to perform duties without presenting a significant risk to the safety and health of themselves or others.

Consider including exercise stress tests (EST) for male fire fighters over the age of 45 years with two or more risk factors for coronary artery disease (CAD) as part of the annual medical evaluation.

Place in a secondary medical fitness program for fire fighters to reduce risk factors for cardiovascular disease and improve cardiovascular capacity.

Ensure that fire fighters are cleared for duty by a physician knowledgeable about the physical demands of firefighting, the personal protective equipment used by fire fighters, and the various components of NFPA 1502, Standard on Comprehensive Occupational Medical Programs for Fire Departments.

Perform an annual physical performance (physical ability) evaluation to ensure fire fighters are physically capable of performing the essential job tasks of structural fire fighting.

Use a secondary (back-up) test to capture appropriate plus/minus of the cardiovascular (CV) risk during emergency incidents.

Perform an autopsy on all sudden fire fighter fatalities.

Provide fire fighters with medical evaluation and clearance on never self-reported breathing apparatus (SCBA).

Consider annual respiratory fit testing.

The Fire Fighter Fatality Investigation and Prevention Program is conducted by the National Institute for Occupational Safety and Health (NIOSH). The purpose of the program is to determine factors that cause or contribute to fire fighter deaths related to the line of duty. Identification of causal and contributing factors enables researchers and safety organizations to take steps to prevent line-of-duty incidents. The program does not seek to determine fault in these fires or the departments or individual fire fighters. To request additional copies of the report (specify the case number) or to be notified about other fire fighter investigation reports or further information, visit the Program Website at www.cdc.gov/niosh/firefighter.html or call toll free 1-800-351-5800.

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Acute Exposures – Carbon Monoxide (CO)

- Interior-
- Exterior-suppression
- Mop-up



Acute Exposures

- Rapid ↑ HR & BP:
 - emergency calls
 - heavy physical exertion



Acute Exposures

Heavy physical exertion



Trigger

Heart attacks



Sources

Willich et. al. NEJM 1993;329:1684
Tofler et. al. J Am Coll Cardiol 1992;20:1049
Mittleman et. al. NEJM 1993;329:1677

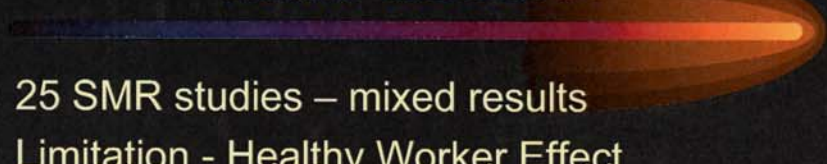
Chronic Exposures



- Shiftwork
- Overtime
- Heat
- Noise
- ETS
- Various Chemicals (including CO)

Source: Steenland & Fine. Occup Med
State of the Art Reviews 2000;15:7-24

Do FF have increased RATES of heart disease?



- 25 SMR studies – mixed results
- Limitation - Healthy Worker Effect
- In 2000, Choi concludes, “there is strong evidence of an increased risk of death overall from heart disease among fire fighters.”

Source: Choi. J Occup & Environ
Med 2000;42:1021-34.

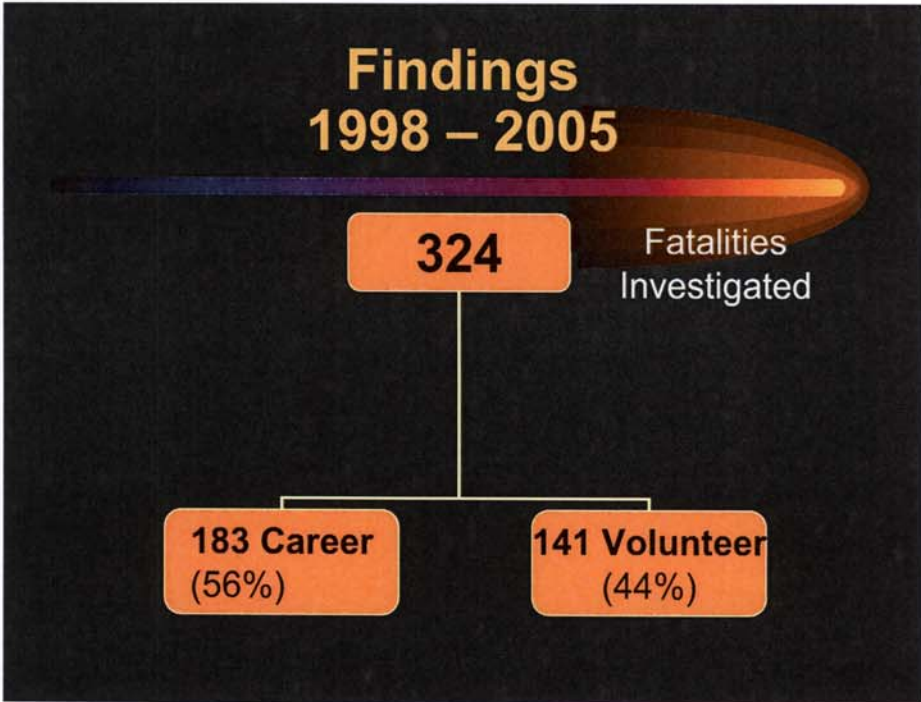
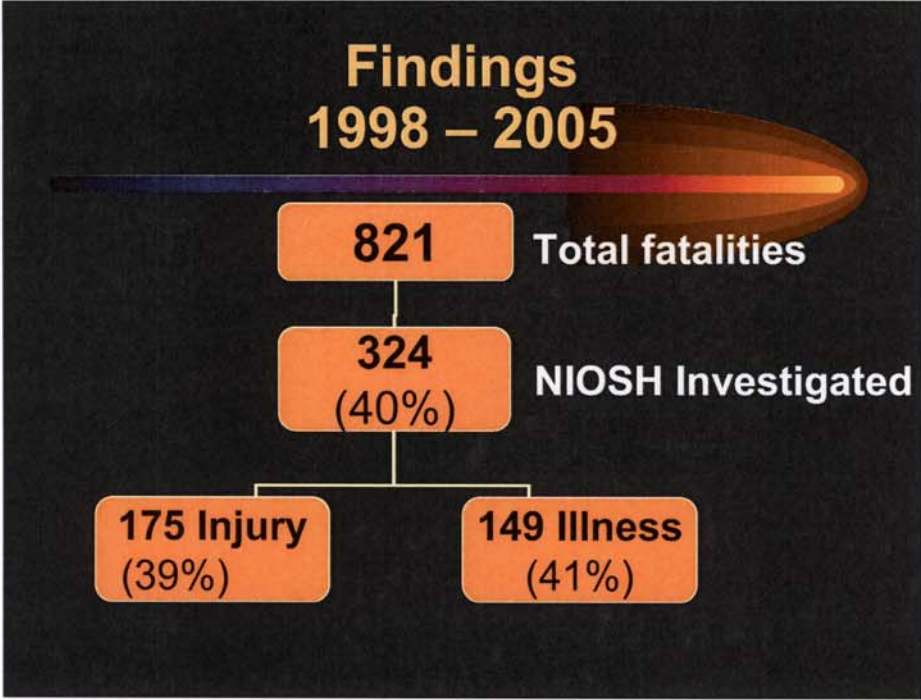
Do FF have increased RATES of heart disease?

- In 1995, Guidotti concluded, “sudden death, myocardial infarction, or fatal arrhythmia occurring on or soon after near-maximal stress on the job are likely to be [work] related...”

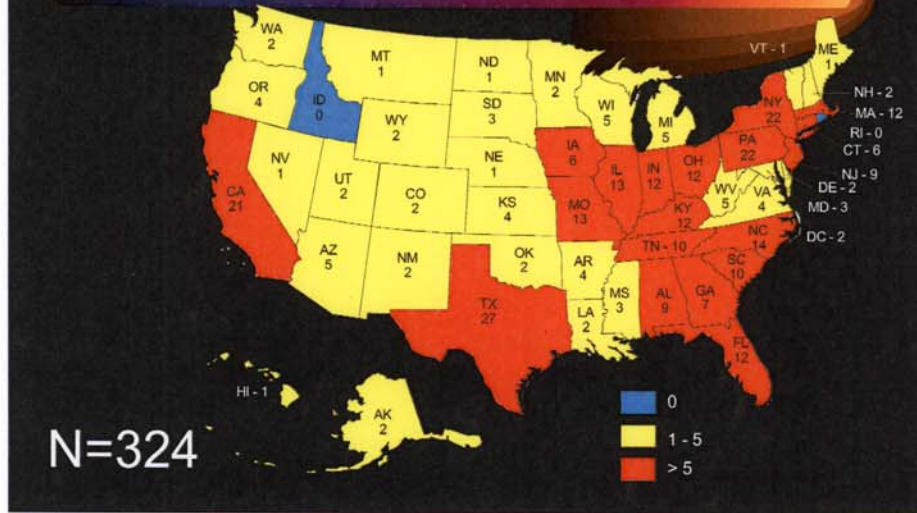
Source: Guidotti. J Occup & Environ Med 1995;37;1348-56

Outline

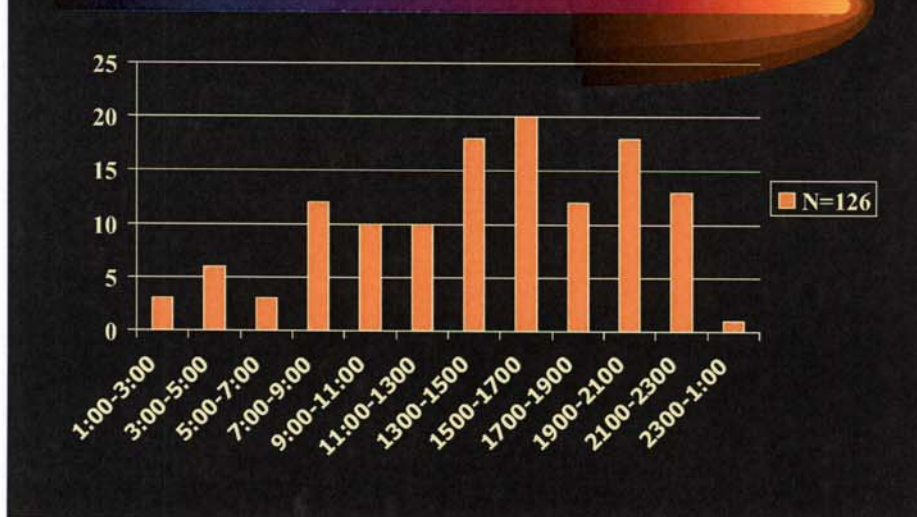
- Congressional mandate & Goals
- Investigation procedures
- Heart disease and fire fighting
- Findings & Recommendations



Investigations by State, 1998-2005

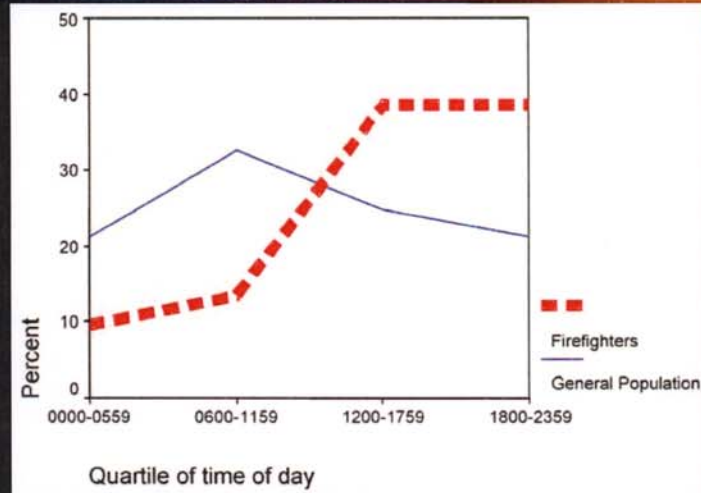


CVD Fatalities by Time of the Event

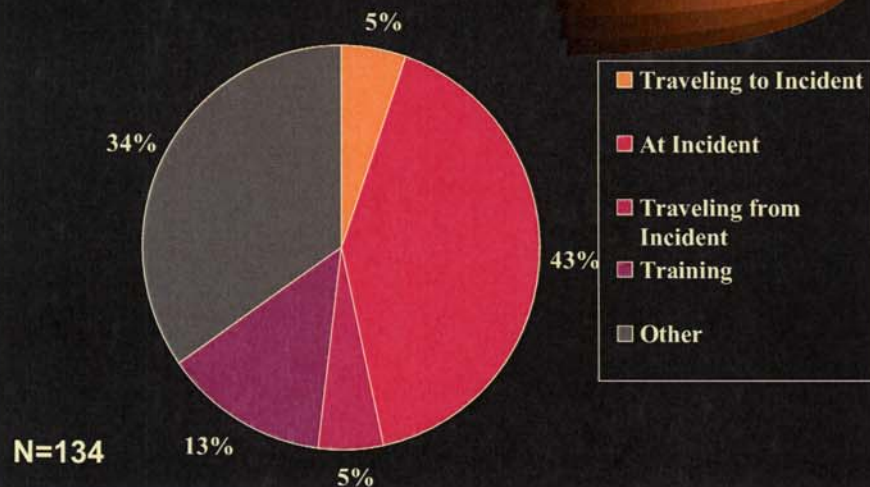


Circadian Distribution of CHD

Kales et. al. Environ Hlth: a global access science source. 2003;2:14



Illness Fatalities by Location

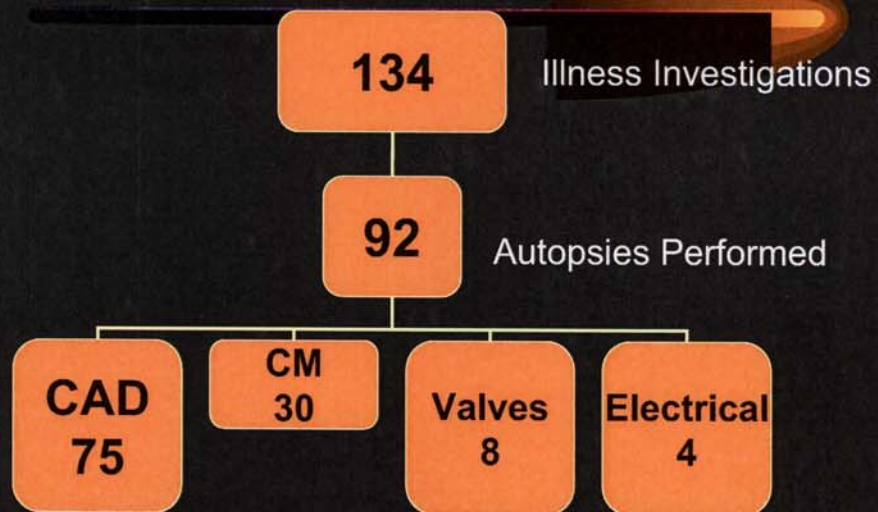


Risk Factors for On-duty FFF

<u>Risk Factor</u>	<u>OR (95% CI)</u>
Fire Suppression	64 (7.4-556)
Training	7.6 (1.8-31.3)
Alarm Response	5.6 (1.1-28.8)

Source: Kales et. al. Environ Hlth: a global access science source. 2003;2:14

Autopsies Information, 1998-2004

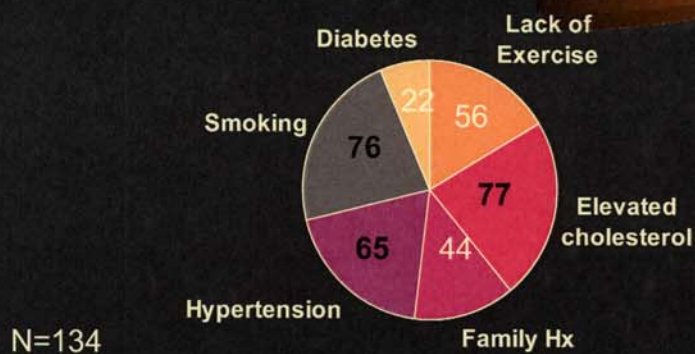


Risk Factors for Coronary Artery Disease*

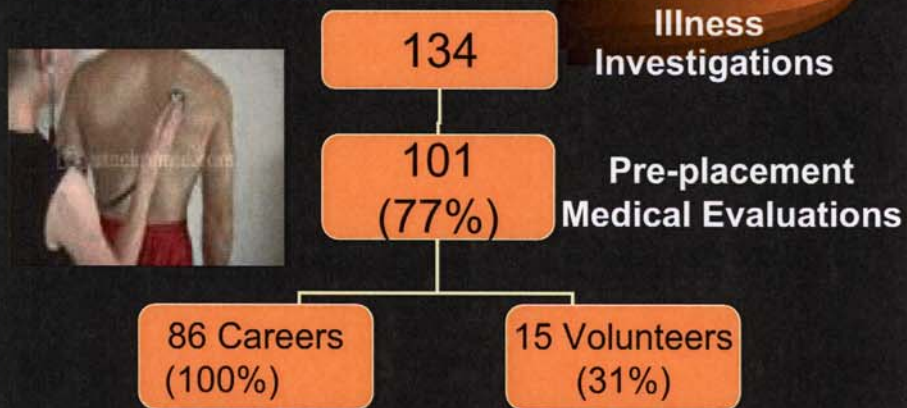
- **Non Modifiable**
 - Family History (<55years)
 - Male gender
 - Advancing age
- **Modifiable**
 - Cigarette Smoking
 - Hypertension
 - Hypercholesterolemia
 - Diabetes mellitus
 - Lack of exercise/ Obesity

* Am Heart Assoc

CAD Risk Factors among Illness Investigation Fatalities, 1998-2004



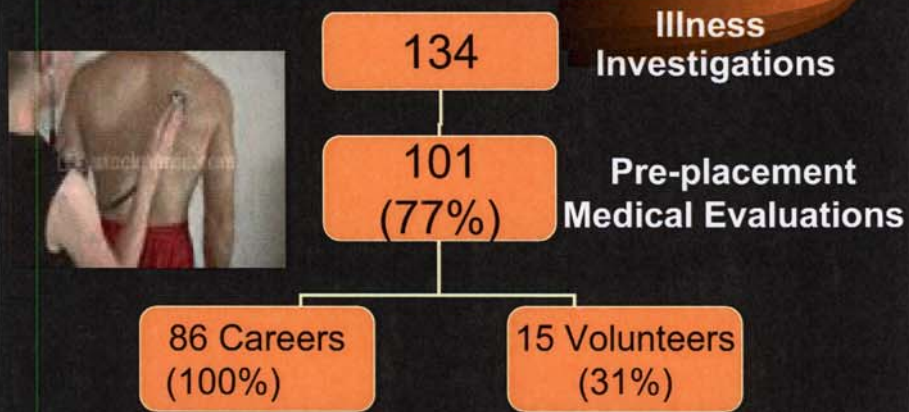
Pre-placement Medical Evaluations



Periodic Medical Evaluations



Pre-placement Medical Evaluations



Periodic Medical Evaluations



Periodic Medical Evaluations



134

Illness Investigations

28
(21%)

Exercise Stress Tests

28 Careers
(33%)

0 Volunteers
(0%)

Wellness/Fitness Programs, 1998-2004

134

Illness Investigations

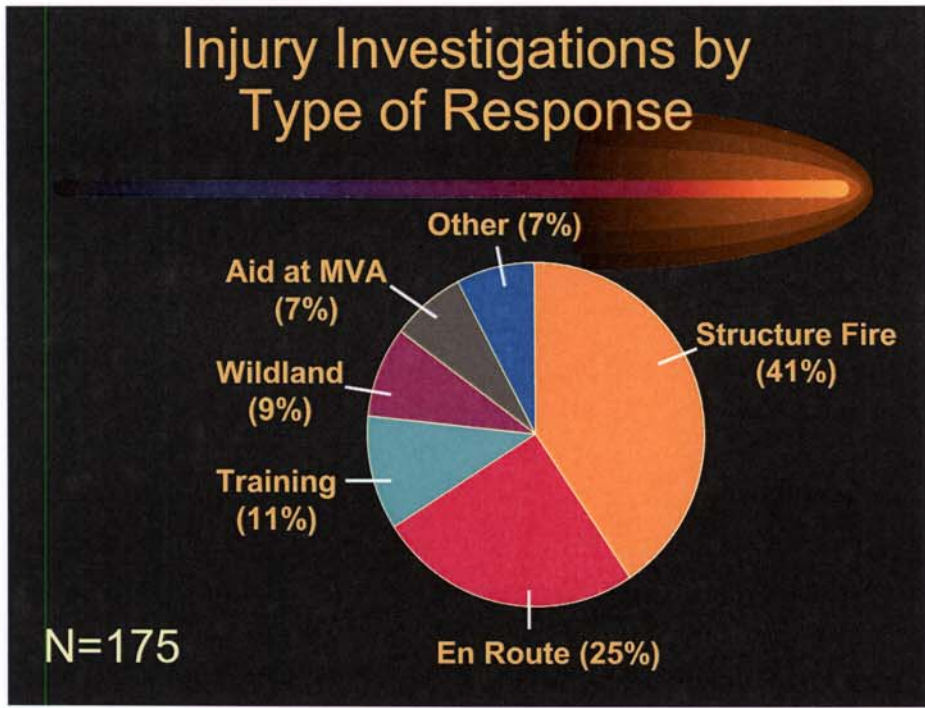
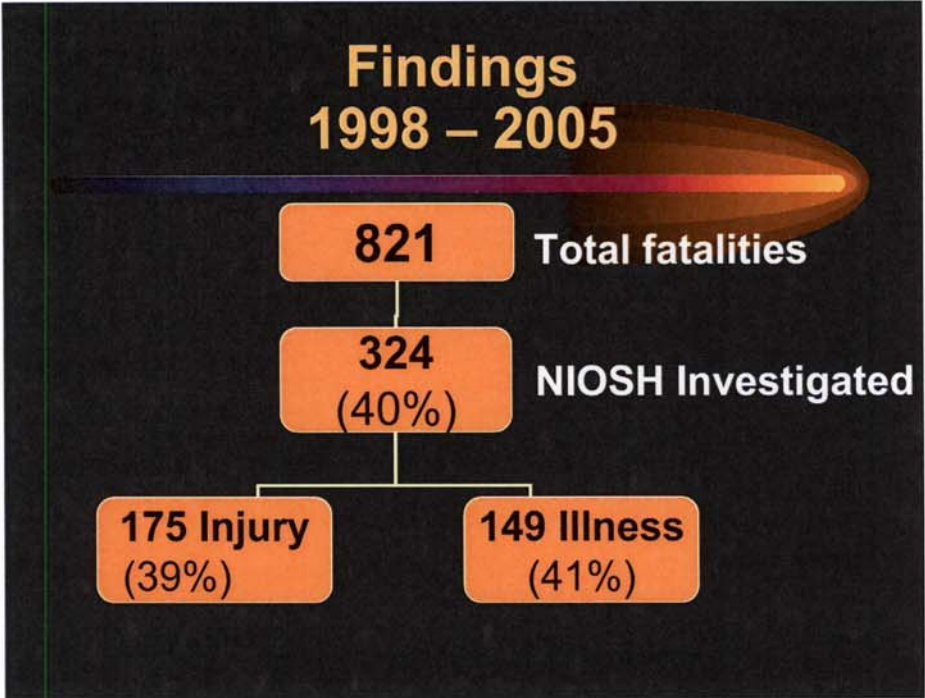
Wellness
52 (39%)

Fitness
66 (49%)

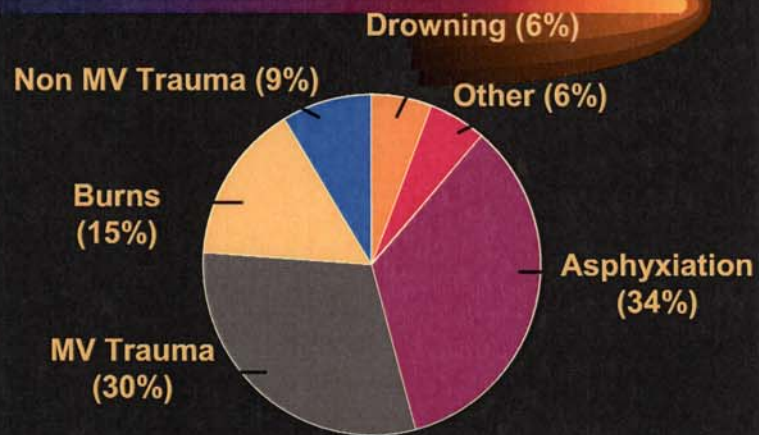
Voluntary
54 (40%)

Mandatory
12 (9%)





Injury Investigations by Type of Fatality



N=175

Injury Recommendations

- SOPs
- Two-way communication between IC and FF crews



Injury Recommendations

**Incident
Command
System
(ICS)**



Injury Recommendations



Seat Belt Use

Injury Recommendations

- **Rapid Intervention Team (RIT)**



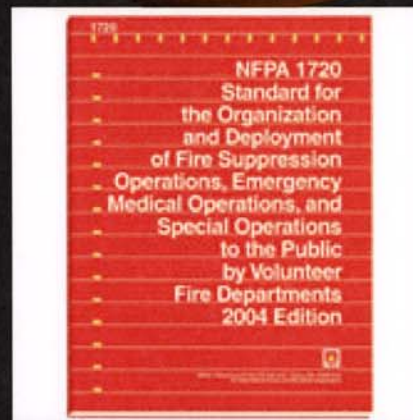
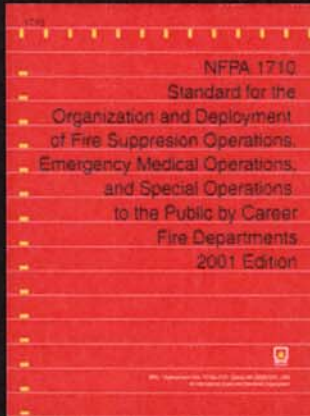
Recommendations

- **SCBA**
 - Inspected
 - Maintenance
 - Fit testing
 - Med Clearance



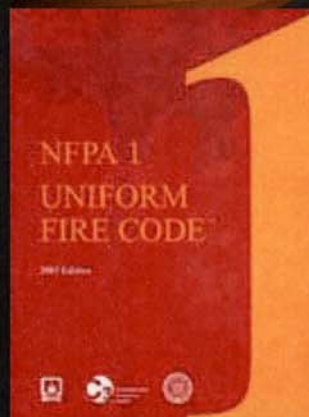
Recommendations

- **Staffing**



Injury Recommendations

- **Fire codes**
- **Research technology**
(e.g., downed FF locators)

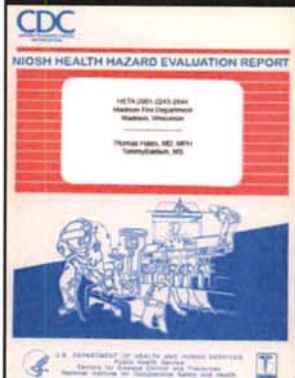


Non-fatal Investigations

- 9 non-fatal injury investigations involving 19 fire fighters.
- 10 non-fatal health investigations via the NIOSH HHE program.

HHE Requests

- Asthma
- Cancer Clusters
- Diesel Exhaust
- BBP
- Respirators



HHE Requests – Emergency Response

- FDNY post-9/11

- Exposure monitoring

- Medical surveillance



Emergency Response NOFD post-Katrina

Exposure
Monitoring



Medical surveillance



Congressional mandate to NIOSH

- Conduct fatality investigations to...
- “identify causal factors” common to fire fighter fatalities,
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- evaluate the effectiveness of those interventions.”

Congressional mandate to NIOSH

- “identify causal factors” common to fire fighter fatalities,

Health Investigations

- SCD triggered by heavy physical exertion
- < 50% screened for CAD risk factors
- < 20% conducted exercise stress tests
- < 10% mandatory fitness/wellness prgm

provide recommendations to prevent similar incidents,

- Annual med eval
 - EST
- Fitness/wellness prgms
- SOP
- Communication
- ICS
- Seat belt use
- RIT
- Adequate personnel
- Respirator prgm
- Fire Codes
- Research

Outline

- Congressional mandate & Goals
- Investigation procedures
- Heart disease and fire fighting
- Findings & recommendations
- Dissemination & outreach efforts
- Research & evaluation
- Input for program direction

NIOSH Fire Fighter Fatality Investigation and Prevention Program

Tim Pizatella
Stakeholders' Meeting
March 22, 2006



Outline

- Dissemination
- Outreach
- Research
- Impact
- Potential Future Program Directions

Dissemination

- Final report back to fire department (and union)
- All reports posted on NIOSH FF web page
- Periodic mailings to all FDs
- Distribute materials at fire service conferences, e.g., FDIC, IAFC, NFPA, NVFC, Redmond



Investigation Reports

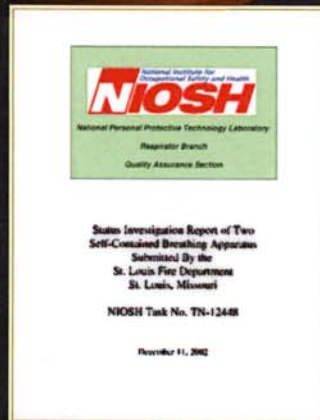


- More than 300 reports available through the NIOSH FF program web page
- Received > 60,000 visits to web page or specific investigation reports in 2005

www.cdc.gov/niosh/fire

SCBA Testing

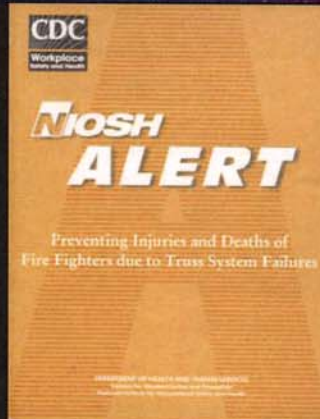
- Report of testing results to NIOSH investigators and FD
- Results included with NIOSH investigative report
- If warranted, a field problem investigation is initiated (about 5% of samples)



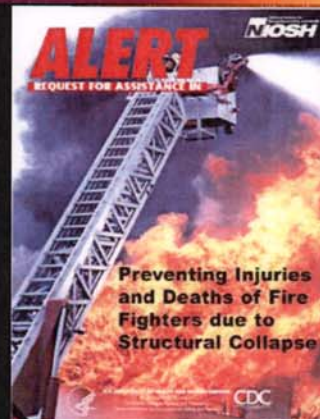
Reprinting of Investigation Summaries in Fire Service Journals



Alerts



**Truss System Failures
2005**



**Structural Collapse
1999**

Workplace Solutions



2005

- Training dives (2004)
- Electrical hazards during wildland FF (2002)
- Tanker truck rollovers (2002)
- Traffic hazards (2001)
- Propane tank fires (1999)

Documents Under Development

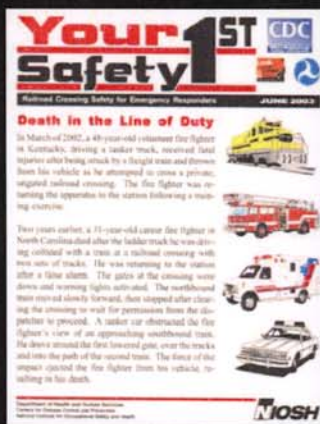
Alerts

- FF training
- Motor vehicle incidents
- Risk versus gain
- Heart attacks/sudden CV events

Workplace Solutions

- Use of military surplus vehicles

Joint Publications with Other Agencies

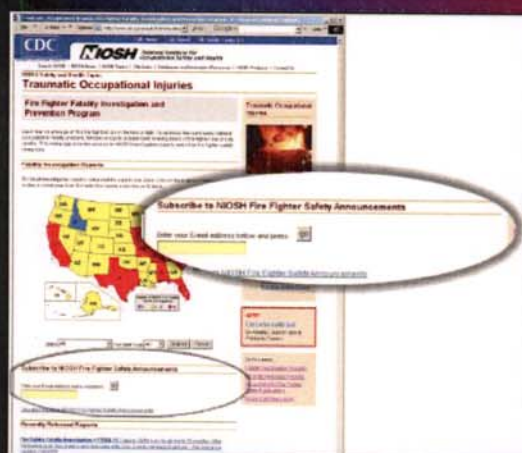


- DOT/Operation Lifesaver on RR crossing safety for emergency responders (2003)
- FDA Public Health Advisory on flashing of oxygen regulators (1999)
- FDA Public Health Notification on oxygen regulators and gasket seals (in development)

Products Developed by Other Agencies with FFFIPP Support

- FDA Video: Hidden Danger, Oxygen Regulator Fires
- NIST simulation of the dynamics of fires investigated by NIOSH
 - in a one-story restaurant--TX (F2000-13)
www.fire.nist.gov/fds/fds03/art003.html
 - In a two-story duplex--IA (F2000-04)
www.fire.nist.gov/fds/fds01/art011.html
 - Also available from NIST on CD-ROM

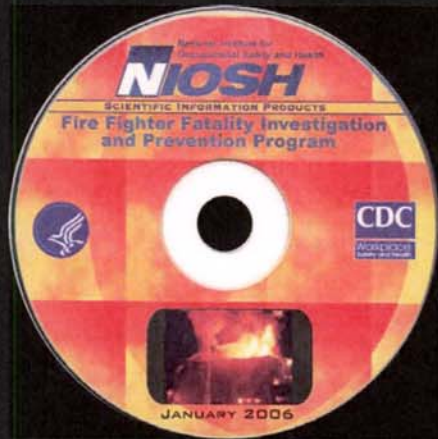
Internet



- Internet web site subscription service
- Added report search capability
- Bi-weekly "safety" quizzes
- Links to other fire service resources

www.cdc.gov/niosh/fire

Other



- CD-ROM with all reports and related publications through December 2005
- Includes links to other NIOSH resources such as the Pocket Guide to Chemical Hazards
- Hard copies

Outline

- Dissemination
- Outreach
- Research
- Impact
- Potential Future Program Directions

Outreach

- Partnered with IAFC and other fire service organizations in June 2005 “stand down” for safety initiative
- MOU with USFA to increase use of NIOSH materials in USFA FF training programs

Outreach



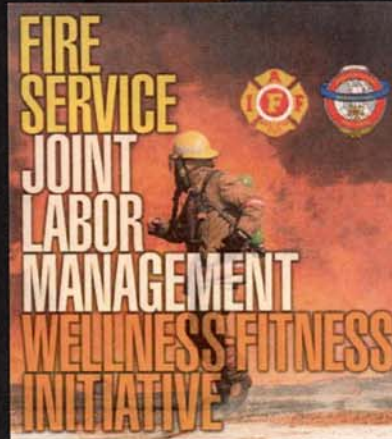
**National Fire
Protection Association**

The authority on fire, electrical, and building safety

- Member of a number of NFPA standards committees
 - Incident Command System (1561)
 - Medical Program (1582)
 - PASS Devices (1982)
 - SCBA (1852)

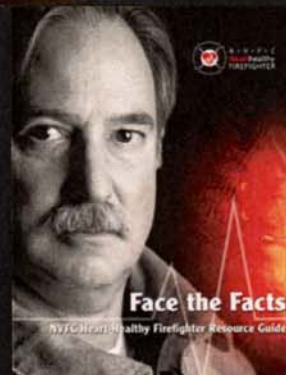
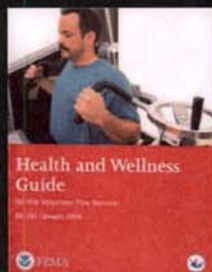
Outreach

- Assisted with implementation of the IAFF/IAFC wellness/fitness Initiative



Outreach

- Work group:
 - Heart Healthy FF Program

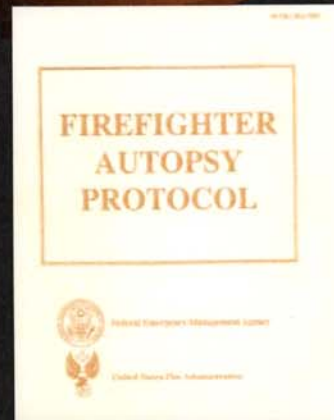


Outreach

DEPARTMENT OF HOMELAND SECURITY
PREPAREDNESS DIRECTORATE

U.S. Fire Administration
Working for a Fire-Safe America

- USFA Work Groups
 - Update autopsy protocol
 - Assist in determining LODD criteria



Outline

- Dissemination
- Outreach
- **Research**
- Impact
- Potential Future Program Directions

Research

- Number of articles published in scientific literature (Appendix 1)
 - Flashing of oxygen regulators
 - Risk factors for injury in structural collapses
 - Occupational transmission of bloodborne pathogens to emergency response personnel

Research



- Effects of FF apparel on the Operation of Fire Response Vehicles
- Biomechanical and Physiological Effects of Fire Fighter Boots
- Assessing FF Glove Size and Fit
- Results will be useful to various NFPA committees

Evaluation of Emergency Vehicle Occupant Safety



- Investigations identified potential hazards to EMTs in patient compartments
- Testing demonstrated restraints could provide extra protection while allowing mobility
- Currently assessing human factors issues

Research/Training Grants



- SCBA Oximetry for FF Physiologic Monitoring
- Bioelectric Telemetry System for FF Safety
- Hazardous Substance Training for Emergency Responders

Outline



- Dissemination
- Outreach
- Research
- **Impact**
- Potential Future Program Directions

Impact



- **NIOSH findings/recommendations**
 - Cited in 2003 NY legislation making it illegal to use people in the role of victims in live-fire training (Bradley's law)
 - Referenced in Hometown Heroes Survivor Benefits Act of 2003

Impact



- **Communication to NFPA 1982 Committee on potential performance issues with PASS devices**
- **Revised standard was drafted addressing issues identified by NIOSH investigations**
- **Public comment period closed early March**
- **Goal to approve new performance criteria and certification test methods by summer 2006**

Impact




- **NIOSH findings/recommendations incorporated or referenced in NFPA standards**
 - **1710 and 1720 recommending minimum staffing levels for career and volunteer fire departments**
 - **Revisions to 1500, minimum requirements for Occupational Safety and Health Programs**

Impact



- **NIOSH findings/recommendations**
 - Used to support manufacturer recall of oxygen regulators for retrofit to replace aluminum high-pressure parts with brass parts
 - Manufacturer also offered a trade-in program with credit toward purchase of new brass regulators

Impact



- **PA training academy required 1,200 local instructors to incorporate “accountability” into training based on NIOSH reports**
- **Fire departments using NIOSH reports in their firefighter safety training programs**
 - Baltimore City MD; Portland, OR; Mentor, OH; Howell Township, NJ

Formal Assessment of Impact of NIOSH Program

- Assess extent that FDs and FFs are aware of the NIOSH program and recommendations
- Identify ways to enhance program impact
- Data collection began February 2006
 - Survey of 3000 fire departments
 - Focus groups with frontline FFs
- Final results due September 2006

Accomplishment Summary

- Fulfilling Congressional mandate
- Widely disseminating findings to fire service
- Working with fire service organizations responsible for developing and implementing FF safety and health programs
- Addressing stakeholder expectations

On-duty Fire Fighter Fatalities by Year, 1997-2005



Source: USFA

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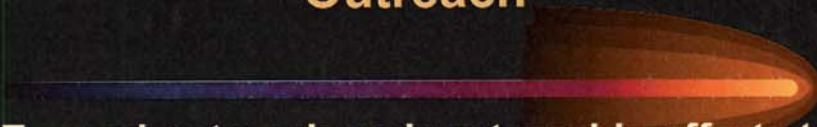
Investigations

- **Continue conducting fatality investigations with priority on:**
 - events accounting for larger numbers of deaths
 - investigations likely to result in new recommendations
 - investigations that impact current prevention efforts of other groups

Dissemination

- **Increase efforts to develop educational materials**
 - Alerts, Workplace Solutions and other documents which summarize multiple investigations
 - Seek new approaches to disseminate materials and facilitate their use by the fire service

Outreach



- **Expand outreach and partnership efforts to foster increased use of NIOSH findings and products by the fire service**
 - standard-setting committees
 - state training academies
 - fire service organizations

Research



- **Conduct more in-depth analysis of available data on FF deaths and injuries**
- **Increase efforts to encourage research which builds on investigation findings**
- **Conduct formal evaluations of specific interventions**

Research

- Cost effectiveness of wellness/fitness programs
- Investigate the barriers to implementing NFPA 1582
- Analyze NIOSH data to regarding return to work and medical clearance
- Investigate issues surrounding heat stress



The findings and conclusions in this presentation have not been formally disseminated by the National Institute for Occupational Safety and Health and should not be construed to represent any agency determination or policy.



Agenda & Follow-up

- Stakeholder Comments
- Discussion
- Web-based
 - niocindocket@cdc.gov
- Summary Report