First-Level Supervisor
Course Plan

Course Details

Description:	This course provides leadership-level information on and best practices for cancer awareness, including communicating risk about and minimizing and mitigating toxic exposure and risk; creating a supportive environment, overcoming barriers, and effecting change; and laws, regulations, standards, and policies. This course also provides leadership-level information on and best practices for behavioral health, including stressors on members and leaders; stress impacts; overcoming barriers to behavioral health and resiliency, creating a supportive environment, member engagement, and effecting change; support resources and how to access them; and documentation types and requirements.
Designed For:	Aspiring and encumbant Company Officers and fire service leaders
Authority:	Office of the State Fire Marshal
Prerequisites:	Behavioral Health and Cancer Awareness 1A
Standard:	Complete all activities and formative tests
Hours:	Lecture: 14:30
	Activities: 9:00
Hours (Total):	24:00
Maximum Class Size:	32
Instructor Level:	Registered Instructor
Instructor/Student Ratio:	1:32 lecture, 1:10 activities
Restrictions:	None
SFT Designation:	FSTEP

Required Resources

Instructor Resources

To teach this course, instructors need:
- See Online Resources

Online Instructor Resources

The following instructor resources are available online:
- State Fire Training FSTEP Curriculum: https://osfm.fire.ca.gov/divisions/state-fire-training/fstep-curriculum/

- Fire Hero Learning Network: https://www.fireherolearningnetwork.com/Training_Programs/Default.aspx

- Firefighter Safety Through Advanced Research: http://www.fstaresearch.org

- Firestrong: https://www.firestrong.org

- First Responder Center for Excellence: https://www.firstrespondercenter.org

- Florida Firefighter Safety and Health Collaborative: https://www.floridafirefightersafety.org

- Healing Our Own: https://healingourown.org

- IAFF Health and Safety: http://client.prod.iaff.org/#page=ProgramsAndServices

- National Fallen Firefighter Foundation: https://www.firehero.org

- National Volunteer Fire Council: https://www.nvfc.org

- UL Firefighter Safety: Health Research: https://ulfirefightersafety.org/research-projects/health/index.html

Behavioral Health:
- "Stress and Coping Self-Test" (various sources online)

- CAGE Substance-Abuse Screening Tool: https://www.hopkinsmedicine.org/johns_hopkins_healthcare/downloads/all_plans/CAGE%20Substance%20Screening%20Tool.pdf

- CDC Alcohol Use Fact Sheet: https://www.cdc.gov/alcohol/fact-sheets/alcohol-use.htm

- Everyone Goes Home: https://www.everyonegoeshome.com

- Firefighter Behavioral Health Alliance: http://www.ffbha.org

- FRCE Behavioral Health Awareness Training Instructor's Manual: http://16lo3h33km9w3q8o12211jxa-wpengine.netdna-ssl.com/wp-content/uploads/2019/04/behavioral-health-instructor-guide.pdf

- Gallup Employee Engagement Questionnaire: https://www.goalbusters.net/uploads/2/2/0/4/22040464/gallup_q12.pdf

- Patient Health Questionnaire (PHQ-9): http://www.cqaimh.org/pdf/tool_phq9.pdf

- Professional Quality of Life Scale (PROQOL) "Compassion Satisfaction and Compassion Fatigue": https://www.proqol.org/uploads/ProQOL_5_English.pdf

- Trauma Screening Questionnaire: https://www.everyonegoeshome.com/wp-content/uploads/sites/2/2014/04/FLSI13TSQ.pdf

Cancer Awareness:
- "Contamination of Firefighter Personal Protective Equipment and Skin and the Effectiveness of Decontamination Procedures": https://www.fsi.illinois.edu/research/cardiochem/files/Fent-2017-Contamination%20of%20firefighter%20persona.pdf

- "Evaluation of Dermal Exposure to Polycyclic Aromatic Hydrocarbons in Fire Fighters": https://www.cdc.gov/niosh/hhe/reports/pdfs/2010-0156-3196.pdf

- "Firefighters' and Instructors' Absorption of PAHs and Benzene during Training Exercises": https://www.sciencedirect.com/science/article/pii/S143846391930313X?via%3Dihub

- "Firefighters Battle Occupational Cancer": https://www.cbsnews.com/news/firefighters-battle-occupational-cancer/

- "Firefighters' Absorption of PAHs and VOCs during Controlled Residential Fires by Job Assignment and Fire Attack Tactic": https://www.nature.com/articles/s41370-019-0145-2

- "Gross Decon Effectiveness" (various sources online)

- "Routes of Exposure," University of Miami Health System

- Fire Fighter Cancer Cohort Study: https://www.ffccs.org

- Firefighter Cancer Support Network: https://firefightercancersupport.org

- FRCE Fire Service Cancer Awareness Training Instructor's Manual: http://16lo3h33km9w3q8o12211jxa-wpengine.netdna-ssl.com/wp-content/uploads/2019/05/Cancer-Awareness-Training-Instructors-Guide.pdf

- Healthy In – Healthy Out: https://www.wscff.org/health-wellness/healthy-in-healthy-out/

- IAFC Lavender Ribbon Report Best Practices for Preventing Firefighter Cancer: https://www.iafc.org/docs/default-source/1vcos/vcoslavendarribbonreport.pdf?sfvrsn=13f88b0d_8

- The NIOSH Hierarchy of Controls: www.cdc.gov/niosh/topics/hierarchy/default.html

Student Resources

To participate in this course, students need:

- CDC Alcohol Use Fact Sheet: https://www.cdc.gov/alcohol/fact-sheets/alcohol-use.htm

- CAGE Substance-Abuse Screening Tool: https://www.hopkinsmedicine.org/johns_hopkins_healthcare/downloads/all_plans/CAGE%20Substance%20Screening%20Tool.pdf

- The NIOSH Hierarchy of Controls: www.cdc.gov/niosh/topics/hierarchy/default.html

- Everyone Goes Home: https://www.everyonegoeshome.com

- Fire Fighter Cancer Cohort Study: https://www.ffccs.org

- Fire Hero Learning Network: https://www.fireherolearningnetwork.com/Training_Programs/Default.aspx

- Firefighter Behavioral Health Alliance: http://www.ffbha.org

- Firefighter Cancer Support Network: https://firefightercancersupport.org

- Firefighter Safety Through Advanced Research: http://www.fstaresearch.org

- Firestrong: https://www.firestrong.org

- First Responder Center for Excellence: https://www.firstrespondercenter.org

- Florida Firefighter Safety and Health Collaborative: https://www.floridafirefightersafety.org

- FRCE Behavioral Health Awareness Training Student Guide: http://16lo3h33km9w3q8o12211jxa-wpengine.netdna-ssl.com/wp-content/uploads/2019/04/behavioral-health-student-guide.pdf

- Healing Our Own: https://healingourown.org

- Healthy In – Healthy Out: https://www.wscff.org/health-wellness/healthy-in-healthy-out/

- IAFC Lavender Ribbon Report Best Practices for Preventing Firefighter Cancer: https://www.iafc.org/docs/default-source/1vcos/vcoslavendarribbonreport.pdf?sfvrsn=13f88b0d_8

- IAFF Health and Safety: http://client.prod.iaff.org/#page=ProgramsAndServices

- National Fallen Firefighter Foundation: https://www.firehero.org

- National Volunteer Fire Council: https://www.nvfc.org

- Trauma Screening Questionnaire: https://www.everyonegoeshome.com/wp-content/uploads/sites/2/2014/04/FLSI13TSQ.pdf

- UL Firefighter Safety: Health Research: https://ulfirefightersafety.org/research-projects/health/index.html

Facilities, Equipment, and Personnel

The following facilities, equipment, or personnel are required to deliver this course:

Facilities

- Classroom
- Open area for practice decontamination
- Yoga or relaxation activity space

Equipment

- Whiteboards, projectors, markers, erasers, and other classroom materials
- Complete sets of wildland and structural PPE and SCBA for each student
- Selection of fire fighting tools and equipment
- Wipes (can be simulations, e.g., paper towels)
- Isolation bags
- Gross decontamination kit, including buckets, brushes (wet and dry), dish soap, water supply (hoses, nozzles, and fittings)
- Hard copies or technology for self-assessment

Personnel (Optional)

- Yoga or relaxation instructor
- Culturally competent subject matter experts
- First responders providing testimonials

Unit 1: Introduction

Topic 1-1: Orientation and Administration

Terminal Learning Objective

At the end of this topic, a student will be able to identify facility and classroom requirements and identify course objectives, events, requirements, assignments, activities, resources, evaluation methods, and participation requirements in the course syllabus.

Enabling Learning Objectives

1. Identify facility requirements
   - Restroom locations
   - Food locations
   - Smoking locations
   - Emergency procedures
2. Identify classroom requirements
   - Start and end times
   - Breaks
   - Electronic device policies
   - Special needs and accommodations
   - Other requirements as applicable
3. Review course syllabus
   - Course objectives
   - Calendar of events
   - Course requirements
   - Student evaluation process
   - Assignments
   - Activities
   - Required student resources
   - Class participation requirements

Discussion Questions

1. To be determined by the instructor

Activities

1. To be determined by the instructor

Topic 1-2: Identifying the Different Levels of the Behavioral Health and Cancer Awareness Curriculum Series

Terminal Learning Objective

At the end of this topic, a student will be able to identify the different levels of the Behavioral Health and Cancer Awareness curriculum series and the courses and requirements for completion.

Enabling Learning Objectives

1. Identify the courses in the Behavioral Health and Cancer Awareness curriculum series

- BHCA 1A: Front-line Responder
- BHCA 2A: First-Level Supervisor
- BHCA 3A: Organizational Leader

2. Identify any other requirements for the curriculum series

Discussion Questions

1. To be determined by the instructor.

Activities

1. To be determined by the instructor.

Unit 2: Cancer Awareness

Topic 2-1: Describing Exposure to Carcinogenic Chemicals and Communicating Risks

Terminal Learning Objective

At the end of this topic, a student, given a leadership role, will be able to describe exposure to carcinogenic chemicals and the pathophysiology of exposure and communicate the risks to assigned members so that sources and routes of exposure, states and categories of carcinogenic chemicals are addressed, and members understand exposure risks.

Enabling Learning Objectives

1. List sources of exposure
    - Fires and products of combustion
    - Hazardous materials
    - Environmental
    - Cross-contamination
2. List common states of carcinogenic chemicals
    - Gases
    - Particulates
3. List common categories of carcinogenic chemicals
    - Polycyclic aromatic hydrocarbon (PAHs)
    - Volatile organic compounds (VOCs)
4. List routes of exposure
    - Absorption
    - Inhalation
    - Ingestion
    - Injection or penetration
5. List common sources of exposure found in various situations and environments
    - Fire suppression
    - Overhaul, mop-up, and postincident activities
    - PPE
    - Equipment
    - Apparatus
    - Station
    - Home
6. Communicate information about exposure to members using educational resources

Discussion Questions

1. Where are you and those you are overseeing exposed to toxic chemicals?
2. Describe the process of what happens when you are exposed to carcinogens, starting with exposure and ending with cancer-promoting cellular changes.

Activities

1. To be determined by instructor

Instructor Notes

1. The instructor should reinforce that if the students are performing their duty, they cannot completely avoid all exposure.
2. It will be important to send students away with one-pagers or other aids to use and share. There are examples in the instructor and student resources section. They should fall into three categories: epidemiology of cancer (statistics), routes of exposure, and how to mitigate exposure.
3. The instructor should refer to the instructor resources.

Topic 2-2: Identifying Laws, Regulations, Standards, and Policies and Procedures

Terminal Learning Objective

At the end of this topic, a student, given a leadership role, will be able to identify applicable federal, state, or local laws and regulations; industry standards and best practices; and policies and procedures of the AHJ relating to a leader's responsibility to minimize, mitigate, and document toxic exposure so that all applicable laws, standards, best practices, policies, and procedures are identified.

Enabling Learning Objectives

1. Identify applicable federal, state, or local laws and regulations
   - Occupational Safety and Health Act (OSHA) and California Occupational Safety and Health Act (Cal/OSHA)
     - PPE
     - Hazardous substances
     - Permissible exposure limits
     - Documentation
   - The Safe Drinking Water and Toxic Enforcement Act of 1986 (Proposition 65)
   - California Code of Regulations, Title 8, § 3203: Injury and Illness Prevention Program
   - Assembly Bill 1127 (1999–2000), amending Cal/OSHA
   - Health and Safety Code § 13110.5
   - Labor Code § 3212.1(5)(B)(b)
   - Firefighter Cancer Registry Act (2014)
2. Identify applicable industry standards
   - Centers for Disease Control
     - The National Institute for Occupational Safety and Health (NIOSH)
     - Agency for Toxic Substances and Disease Registry (ATSDR)
   - The American Conference on Government and Industrial Hygienists
   - NFPA standards:
     - NFPA 1001: Standard for Fire Fighter Professional Qualifications
     - NFPA 1021: Standard for Fire Officer Professional Qualification
     - NFPA 1051: Standard for Wildland Firefighting Personnel Professional Qualification
     - NFPA 1403: Standard on Live Fire Training Evolutions

- o NFPA 1404: <u>Standard for Fire Service Respiratory Protection Program</u>
- o NFPA 1500: <u>Standard on Fire Department Occupational Safety, Health, and Wellness Program</u>
- o NFPA 1582: <u>Standard on Comprehensive Occupational Medical Program for Fire Departments</u>
- o NFPA 1583: <u>Standard on Health-Related Fitness Programs for Fire Department Members</u>
- o NFPA 1584: <u>Standard on the Rehabilitation Process for Members during Emergency Operations and Training Exercises</u>
- o NFPA 1700: <u>Guide for Structural Fire Fighting</u>
- o NFPA 1851: <u>Standard on Selection, Care, and Maintenance of Protective Ensembles for Structural Fire Fighting and Proximity Fire Fighting</u>
- o NFPA 1852: <u>Standard on Selection, Care, and Maintenance of Open-Circuit Self-Contained Breathing Apparatus SCBA</u>
- o NFPA 1951: <u>Standard on Protective Ensembles for Technical Rescue Incidents</u>
- o NFPA 1971: <u>Standard on Protective Ensembles for Structural Fire Fighting and Proximity Fire Fighting</u>
- o NFPA 1981: <u>Standard on Open-Circuit Self-Contained Breathing Apparatus for Emergency Services</u>
- o NFPA 1984: <u>Standard on Respirators for Wildland Fire Fighting Operations</u>
3. Identify applicable policies and procedures of the AHJ

Discussion Questions
1. What are your AHJ's policies and procedures for minimizing and mitigating toxic exposure? How do they compare to the laws and regulations? How do they compare to other AHJ's policies and procedures?
2. What can you do as a leader to minimize and mitigate exposure?
3. What are your legal responsibilities toward minimizing and mitigating exposure to yourself and others?

Activities
1. To be determined by the instructor

Instructor Notes
1. Refer to NFPA 1021 and NFPA 1051, Definition of Duty, for details on leadership responsibilities.
2. Refer to NFPA 1851, 1852, 1971, and 1981 for standards on PPE, which is critical information.
3. NFPA 1500 has critical information that is key to this topic.

Topic 2-3: Identifying and Overcoming Barriers to Mitigating and Minimizing Toxic Exposure

Terminal Learning Objective

At the end of this topic, a student, given a leadership role, will be able to identify cultural, historical, traditional, operational, and logistical barriers to mitigation and minimization of toxic exposure and describe how a leader can work to overcome those barriers so that a variety of ways to address modifiable barriers within a leader's control are identified.

Enabling Learning Objectives

1. Identify modifiable individual and group tactics and behaviors that increase exposure
2. Identify cultural, historical, and traditional barriers to mitigation and minimization of toxic exposure
3. Identify operational and logistical barriers to mitigation and minimization of toxic exposure
   - Unmodifiable barriers
   - Modifiable barriers
4. Identify ways to overcome barriers within the leader's control

Discussion Questions

1. What barriers do you experience within your AHJ?
2. What modifiable barriers are currently within your sphere of influence and your span of control?
3. How can you influence the system if a barrier is outside of your span of control?

Activities

1. The instructor must create an activity directing students to list barriers and classify them as modifiable or unmodifiable, within their control or outside their control.

Instructor Notes

1. The list the students come up with will be used in the next activity or it can be combined into one.

Topic 2-4: Describing How to Create a Supportive Environment and Effect Change

Terminal Learning Objective

At the end of this topic, a student, given a leadership role, will be able to describe how to engage members, create a supportive environment, address barriers, effect change, and influence behaviors to minimize and mitigate toxic exposure so that ways to effect change to protect member health are identified.

Enabling Learning Objectives

1. Identify ways a leader can influence change
   - Setting the example
     - Modeling the behaviors you want to see performed
       - Self-care and lifestyle
       - Following procedures to minimize and mitigate exposure
       - Ethical behavior considering the risks to others
       - Maintaining relevancy
         - Knowing where to find informational resources

- Documenting toxic exposures
  - Documenting on behalf of your crew
  - Encouraging members to document their own exposures
  - Documenting evidence of occupational exposure to support health care, disability, and survivor benefit claims
  - Documenting to collect data for research and development
- Striving to overcome barriers
2. Describe how a leader can promote an environment that engages members
- Supporting members' individual will via education and training
- Promoting an open culture of honest discussion
  - "Bring it to the kitchen table"
- Establishing, communicating, and writing down expectations and procedures that minimize and mitigate toxic exposure

Discussion Questions
1. What are your ethical responsibilities toward minimizing and mitigating exposure to assigned members, their coworkers, their families, and the public?
2. What is your role as a leader in promoting, influencing, and implementing a culture of change that mitigates and minimizes toxic exposure?
3. What responsibility does an individual have when it comes to documenting exposure? How does documentation play a role in claims?

Activities
1. The instructor must create an activity directing students to use their list of barriers created in the last topic and to work on overcoming the barriers and considering how to influence change.
2. The instructor must create an activity directing students to write out expectations for those under their leadership.
3. The instructor must create an activity directing students to perform a personal assessment of their own behaviors.

Instructor Notes
1. None

Topic 2-5: Applying the NIOSH Hierarchy of Controls to Minimize Exposure and Risk

Terminal Learning Objective
At the end of this topic, a student, given a leadership role, a simulated incident, and the NIOSH Hierarchy of Controls, will be able to describe the factors and demonstrate behaviors and best practices for minimizing contaminant exposure and risk by applying the NIOSH Hierarchy of Controls so that behaviors and best practices to reduce exposure and risk and protect member health are described and demonstrated.

Enabling Learning Objectives
1. Explain the NIOSH Hierarchy of Controls
- Elimination

- Substitution
- Engineering controls
- Administrative controls
- PPE

2. Describe unmodifiable factors
   - Infectious agents
   - Genetic history
   - Hormones
   - Age
3. Describe the leader's role in the mitigation of modifiable factors
   - Exposures
   - Sleep
   - Tobacco
   - Alcohol
   - Diet
   - Exercise
   - Metabolic syndrome
   - Overweight obesity
   - UV radiation
4. Establish exclusion (hot) zones, contamination reduction (warm) zones, and support (cold) zones on a fireground
5. Apply the NIOSH Hierarchy of Controls throughout the incident in order to mitigate and minimize exposure
6. Describe the leader's role in implementing and modeling the best practices for minimizing contaminant exposure and risk during fire suppression, overhaul, mop-up, and postincident activities
   - Wearing full PPE with SCBA until no longer exposed to carcinogenic chemicals
   - At wildland fires, wearing full PPE with respiratory protection until no longer exposed to carcinogenic chemicals
   - Gross decontamination procedures in the warm zone prior to rehabilitation
   - Appropriate placement and cleaning procedures for rehabilitation
     - Establish rehabilitation in the cold zone
     - Establish rehabilitation away from smoke (uphill, upwind)
     - Establish rehabilitation away from any sources of exhaust
     - Ensure clean hands, mouth, and face prior to eating or drinking
     - Only enter rehabilitation area after gross decontamination and removal of contaminated gear
   - Storage of contaminated gear in isolation bags for transfer
7. Describe the leader's role in implementing and modeling the best practices for PPE that minimize contaminant exposure and risk
   - Proper fit

- Best practice is two complete sets of everything
    - Helmet, hood, coat and liner, gloves, pants and liner, suspenders, boots, radio straps, hose/truck belts, web gear, goggles, respiratory protection, wildland coat and pants
- Wearing PPE
    - Ensure it is clean before you put it on
    - Best practices for hood exchange
- Transfer of PPE and equipment between job sites
- Gross decontamination
    - Performed in the warm zone
    - The person being decontaminated needs to wear SCBA and remain on supplied air for the duration of the decontamination process
    - The person decontaminating needs to wear SCBA, remain on supplied air, and wear turnouts or splash protection for the duration of the decontamination process
    - While handling contaminated PPE, use EMS gloves
    - Dry, wet, or combination method
    - Wipe and wash your face, neck, armpits, torso, groin, and hands
    - Isolate contaminated turnouts
    - Wash turnouts
        - Air out turnouts at least twenty-five minutes outdoors before washing
        - Launder turnouts at approved location
        - Wash out or dispose of the isolation method
        - Commercial dishwasher for helmet and SCBA, boots, and gloves
        - Extractor washer for turnouts
        - Turnout dryer
        - While washing turnouts, need to wear EMS gloves and respirator and protective clothing, and have a negative pressure environment
8. Describe the leader's role in implementing and modeling the best practices for equipment that minimize contaminant exposure and risk
    - The dangers of equipment off-gassing and cross-contaminating after exposure
    - Completing gross decontamination
    - Having a designated decontamination station
    - PPE for all decontamination practices
    - Cleaning products designed for purpose
    - Apparatus
        - The clean cab concept and treating contaminants as biohazards
        - Turning off apparatus and other vehicles to minimize exhaust
9. Describe the leader's role in implementing and modeling the best practices that minimize contaminant exposure and risk in the workplace
    - Avoid cross-contamination at all costs

- Identify hot, warm, and cold zones in fire stations
- Treat living quarters as cold zones
  - PPE must never enter cold zones
  - Keep all doors at zone interfaces shut
  - Wash hands, face, and neck before entering the cold zone
- Identify possible warm zones in fire stations (areas of interface between hot and cold)
  - Shower within an hour of exposure (cold and then hot water)
  - Infrared saunas as chemical decontamination units (CDUs)
  - PPE storage in the warm zone
  - Wash all garments and undergarments worn beneath PPE separately at the station
- Identify hot zones
  - Treat apparatus floor as a hot zone because of vehicle exhaust
  - The following must not be located in the hot zone
    - Ice machines
    - Workout equipment
  - PPE storage must be situated to prevent exhaust carcinogen contamination
    - Off-duty storage
    - Response-ready storage
  - Use of exhaust systems
  - Tool maintenance and checks performed outdoors, wearing PPE, to prevent exposure
  - Tool decontamination performed in a negative pressure environment and while wearing PPE to prevent carcinogen exposure
  - Perform apparatus pretrips outside of the apparatus floor
10. Describe the leader's role in implementing and modeling the best practices that minimize contaminant exposure and risk at home
    - Avoid cross-contamination at all costs, including with PPE
    - Don't wash work items at home
      - PPE including wildland
      - Uniforms
      - Personal items used during work hours
      - Garments or undergarments worn beneath PPE
    - Keep all work items in a sealed bag in vehicle and avoid direct sunlight and heat
    - Shower prior to leaving the station
11. Describe the leader's role in documenting all exposures, injuries, and illnesses within the AHJ reporting system

Discussion Questions
1. Explain why the Hierarchy of Controls does not preclude your duty to act in an emergency.
2. What system does your AHJ use for documenting exposures?

3. How do you apply the Hierarchy of Controls to:
   - The decontamination process (on scene and postincident)
   - Rehabilitation
   - Other incident activities
   - Station and home
   - PPE cleaning
4. What are the best practices for cleaning and decontaminating PPE?
5. How does using skin wipes reduce your exposure?
6. Why is it critical to complete an exposure report for all exposures, injuries, and illnesses on all incidents?

Activities
1. The instructor must create an activity directing students to apply the NIOSH Hierarchy of Controls in order to mitigate and minimize exposure.
2. The instructor must create an activity directing students to share the reporting systems of their AHJs for comparison.

Instructor Notes
1. It is very important that the instructor underscore that the duty to act overrides the Hierarchy of Controls.
2. This topic is interrelated with those pertaining to behavioral health and stress reduction. Some of the wellness behaviors will overlap.
3. NFPA 1500 (2019) Standard on Fire Department Occupational Safety, Health, and Wellness Program A.14.6 addresses exposure reports.
4. The instructor should refer to and share the NIOSH photo showing the limits of PPE in preventing exposure.

Unit 3: Behavioral Health

Topic 3-1: Describing Stressors Impacting Members and Leaders

Terminal Learning Objective
At the end of this topic, a student, given a leadership role, will be able to describe common stressors impacting members and additional stressors experienced at the leadership level so that stressors that are new at the leadership level and which stressors are within a leader's control are described.

Enabling Learning Objective
1. Describe how stressors and stress reactions found in various situations vary between members and those in a leadership role
   - Responsibility for others' safety and mental health
   - Performance evaluations (providing and receiving)
   - Operational after-action and critique
   - Relationships with peers, subordinates, command staff, family, and the public
   - Training
   - Problem behaviors

- Responding to incidents
- Promoting
- Mandatory overtime
- Balancing work and home life
- Leadership
- Personal growth

2. Describe the difference between stressors within the leader's control and outside of their control

Discussion Questions
1. What stressors have you experienced that you were not anticipating?
2. What challenges are associated with transitioning from peer to supervisor?
3. What are stressors you have control over? What are stressors you do not?
4. Compare and contrast the stressors experienced by members and those in leadership roles.

Activities
1. To be determined by the instructor

Instructor Notes
1. It is important for the instructor to keep the discussion focused on stress and stressors rather than allowing it to turn into a sharing of retraumatizing "war stories."
2. The instructor should refer to the Healing Our Own, Firefighter Behavioral Health Alliance, National Fallen Firefighter Foundation, and Firestrong.

Topic 3-2: Describing and Discussing the Impacts of Stress

Terminal Learning Objective
At the end of this topic, a student, given a leadership role, will be able to describe and discuss with members the impacts of stress so that various stress impacts and related behaviors are identified and stress self-assessments are administered.

Enabling Learning Objectives
1. Describe the physiological and emotional impacts of stress
   - Acute versus cumulative
   - Stress and the brain
     - Parasympathetic versus sympathetic (fight or flight)
   - Adrenal fatigue
   - Mood and cognitive impacts
   - Compassion fatigue
   - Injuries and medical conditions
2. Describe behaviors associated with unmanaged stress
   - Isolation or withdrawal
   - Anger and irritability
   - Sleep problems
   - Depression

- Marital and family issues
- Substance abuse
- Addictions
- Thoughts of suicide
- Other forms of self-harm or risky behavior

3. Demonstrate administering a self-assessment to members
4. Demonstrate leading a discussion with members about the results of self-assessments

Discussion Questions
1. What are examples of changes in behavior or decreased work performance on behalf of a member have you observed?
2. What could be signs of a stress impact or stress response?
3. What are examples of acute and cumulative stress?
4. What is your definition of binge drinking? What is your definition of a healthy weekly intake?

Activities
1. The instructor must create an activity directing students to complete a CAGE substance-abuse screening tool.
2. The instructor must create an activity directing students to lead members through a stress self-assessment.

Instructor Notes
1. This topic may be triggering to the students. The instructor should come prepared with resources in the event a student shows signs of distress.
2. The instructor must underscore the importance of not dismissing concerns.
3. The instructor must underscore that the students will not be diagnosing; their role will be recognizing warning signs and referring to support resources.
4. The instructor should refer to the CDC guidelines about alcohol use.
5. There are self-assessments in the instructor resources section.
6. It is healthy to do self-assessments on an ongoing basis, and the instructor should encourage students to practice this.
7. The instructor should refer to the Healing Our Own, Firefighter Behavioral Health Alliance, National Fallen Firefighter Foundation, Florida Firefighter Safety and Health Collaborative, National Volunteer Firefighter Council, and Firestrong websites. The instructor should provide statistics on issues like suicide and PTSD among front-line responders.

Topic 3-3: Identifying Barriers to Behavioral Health and Resiliency

Terminal Learning Objective
At the end of this topic, a student, given a leadership role, will be able to identify cultural, historical, traditional, operational, and logistical barriers to behavioral health and resiliency and

describe how a leader can work to overcome those barriers so that a variety of ways to address modifiable barriers within a leader's control are identified.

Enabling Learning Objectives
1. Identify cultural, historical, and traditional barriers to mitigation and minimization of stressors and stress impacts
2. Identify modifiable culture and behaviors that decrease engagement with behavioral health and wellness
3. Identify operational and logistical barriers to behavioral health and resiliency
   - Unmodifiable barriers
   - Modifiable barriers
4. Identify ways to overcome barriers within the leader's control

Discussion Questions
1. What stigmas have you experienced or observed with regard to behavioral health within or outside of your workplace?
2. How do generation, family, and other factors impact beliefs and perceptions about behavioral health and wellness?
3. What barriers do you experience within your AHJ?
4. What modifiable barriers are currently within your sphere of influence and your span of control?
5. How can you influence the system if a barrier is outside of your span of control?

Activities
1. The instructor must create an activity directing students to list barriers to behavioral health and resiliency and classify them as modifiable or unmodifiable, within their span of control or outside of their span of control.

Instructor Notes
1. The list the students come up with will be used in the next activity or it can be combined into one.

Topic 3-4: Describing Member Engagement, Creating a Supportive Environment, and Change

Terminal Learning Objective
At the end of this topic, a student, given a leadership role, will be able to describe how to engage members, create a supportive environment, address barriers, effect change, and influence behaviors to minimize and mitigate stressors and stress impacts so that ways to effect change to protect member behavioral health are identified.

Enabling Learning Objectives
1. Identify ways a leader can influence change
   - Setting the example
     - Modeling the behaviors you want to see performed
       - Open and honest communication
       - Seeking support

- Self-care and lifestyle
- Following procedures to minimize and mitigate exposure
- Ethical behavior considering the risks to others
- Knowing where to find informational resources
    - Maintaining relevancy
        - Regular check-ins and information sharing with members
        - Familiarize yourself with current legislation, research, and best practices
        - Maintaining currency in education
    - Documenting
    - Striving to overcome barriers
2. Describe how a leader can promote an environment that engages members
    - Use tools to measure member engagement such as "The Gallup Q12 Index"
    - Gathering and using feedback
    - Supporting members' individual will via education and training
    - Promoting an open culture of honest discussion
        - "Bring it to the kitchen table"
    - Establishing, communicating, and writing down expectations and procedures for a positive culture that promotes wellness

Discussion Questions
1. What are your ethical responsibilities toward minimizing and mitigating stressors and stress impacts on assigned members, their coworkers, their families, and the public?
2. What is your role as a leader in promoting, influencing, and implementing a culture of change that mitigates and minimizes stressors and stress impacts?
3. How can you create and normalize a culture of consistent honest discussion?
4. How do "The Gallup Q12 Index" questions relate to basic needs, management support, teamwork, and growth?

Activities
1. The instructor must create an activity directing students to use their list of barriers created in the last topic and to work on overcoming the barriers and considering how to influence change.
2. The instructor must create an activity directing students to write out and share expectations for those under their leadership.
3. The instructor must create an activity directing students to perform a personal assessment of their own beliefs and attitudes toward behavioral health and seeking help.

Instructor Notes
1. The instructor should refer to the "Stress Continuum Model."

Topic 3-5: Describing Factors and Demonstrating Practices for Resilience

Terminal Learning Objective

At the end of this topic, a student, given a leadership role, will be able to identify, implement, and promote resilience practices so that healthy practices and coping mechanisms that a leader can implement are identified and implementation procedures are described.

Enabling Learning Objectives

1. List practices that support and promote healthy nutrition, sleep, exercise, relaxation techniques, and rest in mediating and mitigating stress
   - Group meals
   - Nutritious meals
   - Yoga
   - Physical training in groups
   - Fatigue management and ensuring adequate work-rest cycles
   - Regular self-assessments
   - Breathing exercises
   - Mindfulness and meditation practices
   - Recreation
   - Maintaining flexibility in daily routines in response to calls, types, and volume
   - Openness to new ideas and techniques
2. Describe how to implement practices that promote wellness and resilience
3. Describe healthy and unhealthy coping mechanisms
4. Identify potential consequences of unhealthy coping mechanisms
5. Describe the leader's role in communication for coping with stress
   - Personal life
   - Professional life

Discussion Questions

1. What are some stressors you will encounter in a new leadership role? What are some coping skills for these?
2. How is connectedness at the workplace a part of resilience? How do you create, maintain, and promote connectedness among members?
3. How can you implement practices promoting resilience? What barriers might you encounter?

Activities

1. The instructor must create an activity directing students to choose methods of promoting resilience and make a plan for implementing them in the workplace.
2. The instructor must choose a practice from the list or have the students choose one and create an activity directing the students to perform the practice.

Instructor Notes

1. The instructor should present information on evidence-based relaxation techniques, possibly including yoga, breathing exercises, and mindfulness exercises. The instructor could choose to bring in someone to lead the class in relaxation techniques, such as a yoga instructor or someone familiar with breathing exercises.

2. Culturally competent providers and clinicians can help provide the information in this topic, such as peer counselors, psychologists with experience in fire culture, or chaplains.

Topic 3-6: Identifying Support Resources and Describing How to Access Them

Terminal Learning Objective

At the end of this topic, a student, given a leadership role, will be able to identify available support resources and describe how to access them so that resources are identified and methods for access are described.

Enabling Learning Objectives

1. Identify internal and external support resources
   - Peer support
     - Confidentiality
   - Chaplains
   - Employee support services and employee assistance programs
   - Defusing, debriefing, crisis management briefing
   - Clinicians
   - Family Medical Leave Act
   - Trauma retreats
   - Inpatient treatment facilities
   - Websites
   - Crisis hotlines
2. Describe how to access internal and external support resources

Discussion Questions

1. What resources are available in your AHJ? Which are internal and which are external?
2. How would you encourage members to and support them in using support services?
3. When should a supervisor refer a member to support services? When is it required?
4. What are some confidentiality issues and laws leaders must be aware of? How can you reconcile the need for confidentiality with not maintaining stigma?
5. What is the policy in your AHJ with regard to confidentiality?

Activities

1. The instructor must create an activity directing students to present the confidentiality differences between a leadership role and a peer-support role using the California Firefighter Peer Support and Crisis Referral Services Act as a resource.

Instructor Notes

1. The California Firefighter Peer Support and Crisis Referral Services Act, AB 1116, adds Article 21 to Government Code, Title 2, Division 1, Chapter 7.
2. Culturally competent providers and clinicians can help provide the information in this topic, such as peer counselors, psychologists with experience in fire culture, or chaplains.

Topic 3-7: Describing Types of Documentation, Requirements, and Individual Documentation

Terminal Learning Objective

At the end of this topic, a student, given a leadership role and the policies and procedures for the AHJ, will be able to describe the different types of documentation of behavioral health exposure and injuries, the requirements for documentation, and how and when individual members should complete documentation so that the types of documentation and documentation needs are described.

Enabling Learning Objectives

1. Identify examples of incidents that may prompt documentation as an exposure or injury, such as:
   - Close calls or near misses and maydays
   - Major disaster or mass casualty incident
   - Serious injury, death, or suicide of fire personnel
   - Serious multivictim incident
   - Traumatic injury or death of children
   - Serious injury of death to a civilian occurring during or caused by authority operations
   - Loss of life following an unusual or extremely prolonged expenditure of emotional and physical energy by personnel
   - Incident that attracts unusual heavy media attention
   - Serious incident where victims are known to personnel
   - Communicable disease exposure with serious health implications
   - Significant injury to firefighter with long-term health implications or extended time off duty

2. Identify types of documentation, such as:
   - NFIRS/RMS
   - Personal exposure reporting
     - ○ NFORS
     - ○ PER online
   - Internal documentation
     - ○ Informal notes
     - ○ Peer-support notes

3. Identify applicable laws, regulations, and policies and procedures of the AHJ regarding documentation of exposures and injuries, such as:
   - Federal
   - State
     - ○ Labor Code § 3212.15 (SB 542), addressing workers' compensation
     - ○ Health and Safety Code § 13110.5
   - Local
   - Policies and procedures of the AHJ

4. Describe how to educate and encourage individual members to document their own exposures and injuries

Discussion Questions
1. What are the benefits of a member documenting their own exposures and injuries?
2. When is Labor Code § 3212.15 applicable? What is "rebuttable"?
3. What are your AHJ's policies and procedures for documenting behavioral health exposures and injuries?
4. What are your AHJ's policies and procedures for filing claims?
5. What are your AHJ's policies and procedures for receiving treatment?
6. As a supervisor, what are your responsibilities in terms of identifying member-related problems?
7. As a supervisor, what are the limits on your authority in this area?

Activities
1. The instructor must create an activity directing students to document a behavioral health exposure or injury on a sample form.

Instructor Notes
1. The instructor will need sample forms such as those of the AHJ or a DWC-1.
2. This is a dynamic and growing area, so the instructor will need to keep current on laws and policies and best practices.

Time Table

Segment	Lecture Time	Activity Time	Total Unit Time
Unit 1: Introduction			
Topic 1-1: Orientation and Administration			
Lecture	0:45		
Activity 1-1: To be determined by instructor		0:00	
Topic 1-2: Identifying the Different Levels of the Behavioral Health and Cancer Awareness Curriculum Series			
Lecture	0:15		
Activity 1-2: To be determined by instructor		0:00	
Unit 1 Totals	**1:00**	**0:00**	**1:00**
Unit 2: Cancer Awareness			
Topic 2-1: Describing Exposure to Carcinogenic Chemicals and Communicating Risks			
Lecture	1:00		
Activity 2-1: To be determined by instructor		0:00	
Topic 2-2: Identifying Laws, Regulations, Standards, and Policies and Procedures			
Lecture	1:00		
Activity 2-2: To be determined by instructor		0:00	
Topic 2-3: Identifying and Overcoming Barriers to Mitigating and Minimizing Toxic Exposure			
Lecture	1:00		
Activity 2-3: Listing and Classifying Barriers		1:00	
Topic 2-4: Describing How to Create a Supportive Environment and Effect Change			
Lecture	1:30		
Activity 2-4a: Overcoming Barriers and Influencing Change		0:30	
Activity 2-4b: Writing Expectations		0:30	

Segment	Lecture Time	Activity Time	Total Unit Time
Activity 2-4c: Performing a Personal Assessment of Behaviors		0:30	
Topic 2-5: Applying the NIOSH Hierarchy of Controls to Minimize Exposure and Risk			
Lecture	1:00		
Activity 2-5a: Applying the NIOSH Hierarchy of Controls		0:30	
Activity 2-5b: Sharing Reporting Systems		0:30	
Unit 2 Totals	**5:30**	**3:30**	**9:00**
Unit 3: Behavioral Health Awareness			
Topic 3-1: Describing Stressors Impacting Members and Leaders			
Lecture	1:00		
Activity 3-1: To be determined by instructor		0:00	
Topic 3-2: Describing and Discussing the Impacts of Stress			
Lecture	2:00		
Activity 3-2a: Performing a CAGE screening		0:30	
Activity 3-2b: Performing a Self-Assessment		0:30	
Topic 3-3: Identifying Barriers to Behavioral Health and Resiliency			
Lecture	1:00		
Activity 3-3: Classifying Barriers		1:00	
Topic 3-4: Describing Member Engagement, Creating a Supportive Environment, and Change			
Lecture	1:45		
Activity 3-4a: Overcoming Barriers and Influencing Change		0:30	
Activity 3-4b: Writing Out Expectations		0:30	
Activity 3-4c: Performing an Assessment of Beliefs and Attitudes		0:30	
Topic 3-5: Describing Factors and Demonstrating Practices for Resilience			
Lecture	0:30		

Segment	Lecture Time	Activity Time	Total Unit Time
Activity 3-5: Planning to Promote Resilience		0:30	
Activity 3-5: Practicing Relaxation		1:00	
Topic 3-6: Identifying Support Resources and Describing How to Access Them			
Lecture	0:45		
Activity 3-6: Presenting the confidentiality differences between a leadership and a peer-support role		0:30	
Topic 3-7: Describing Types of Documentation, Requirements, and Individual Documentation			
Lecture	1:00		
Activity 3-7: Documenting Behavioral Health Exposures or Injuries		0:30	
Unit 3 Totals	**8:00**	**6:00**	**14:00**
Lecture, Activity, and Unit Totals:	**14:30**	**9:30**	**24:00**

Course Totals

Total Lecture Time (LT)	14:30
Total Activity Time (AT)	9:30
Total Testing Time (TT)	0:00
Total Skill Exercise Time (ST)	0:00
Total Course Time	**24:00**

Acknowledgments

State Fire Training gratefully acknowledges the following individuals and organizations for their diligent efforts and contributions that made the development and publication of this document possible.

Cadre Leadership

Kevin Conant
Cadre Leader
Fire Service Training Specialist III, State Fire Training

Caryn Petty

Cadre Leader
Deputy State Fire Marshal, State Fire Training

Laura Garwood
Cadre Editor
Sacramento State University

Cadre Participants

Tim Andre
Battalion Chief, Huntington Beach Fire Department

Robert Anthony
The Firefighter Cancer Support Network

Brent Brainard
Wellness Officer, San Diego Fire-Rescue Department

Noah Brownlow
Battalion Chief, Richmond Fire Department

Alaina Brunacini
Behavioral Health Specialist, Private Practice

Chris Emmons
Admin Officer, Humboldt Fire Department

Nicole Gissell
Battalion Chief, CAL FIRE Training Center Ione

Mike Massone
Captain, San Diego Federal Firefighters

Mike Ming
Deputy Fire Chief Employee Support Services, CAL FIRE

Dionisio Mitchell
Battalion Chief, Kern County Fire Department

Mary Murphy
Medical Services Officer, North County Fire Protection District

Mynda Ohs
Author and Psychologist, Private Practice

Kristin Thompson
EMS Chief, Newport Beach Fire Department

Derek Urwin
Engineer, Los Angeles County Fire Department

Rob Wheatley
Division Chief and Director of Fire Training, CAL FIRE

Partners

State Fire Training also extends special acknowledgment and appreciation to the Conference and Training Services Unit with the College of Continuing Education at California State University, Sacramento, for its ongoing meeting logistics and curriculum development support, innovative ideas, and forward-thinking services. This collaboration is made possible through an interagency agreement between CAL FIRE and Sacramento State.