


**FAIRFAX COUNTY FIRE AND RESCUE DEPARTMENT  
STANDARD OPERATING PROCEDURE**

	<b>SUBJECT:</b> WORK PERFORMANCE EVALUATION (WPE)		<b>S.O.P.</b> 02.04.04
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	<b>CATEGORY:</b> Personnel	<b>SUBCATEGORY:</b> Medical and Fitness Standards	
	<b>APPROVED BY:</b>  Ronald L. Mastin <i>Ronald L. Mastin</i> <b>FIRE CHIEF, FIRE AND RESCUE DEPARTMENT</b>	<b>EFFECTIVE DATE:</b> May 11, 2007 <b>REVISION DATE:</b> September 1, 2008	
<b>FORMS REQUIRED:</b> FRD-037, Work Performance Evaluation Form FRD-039, PSOHC Unsuccessful Completion of WPE Referral Form FRD-158, Work Status Notification Form			
<b>NOTE:</b> Current forms are located on the department's Intranet			

**PURPOSE:**

To ensure uniformed Fire and Rescue Department (FRD) members can meet the physical demands of firefighting, rescue, and emergency medical duties in a safe and effective manner. To identify Work Performance Evaluation (WPE) procedures and guidelines for proper administration.

**I. PREFACE**

The WPE was developed by the Health and Safety Division as a task-orientated physical performance evaluation. It was statistically validated by a private contractor, Human Performance Systems.

The WPE is supported by a strong departmental infrastructure including the Public Safety Occupational Health Center (PSOHC), the Health and Safety Division, mandatory physical fitness training, company operations training, and peer fitness trainers.

**Process of Assessments and Events Included in the WPE**

- |              |                                    |
|--------------|------------------------------------|
| Preparation: | Pre-Assessment Screening/Warm-up   |
| Event 1:     | Protective Gear Donning            |
| Event 2:     | Ladder                             |
| Event 3:     | Forcible Entry                     |
| Event 4:     | High-Rise Pack                     |
| Event 5:     | Handline Advance                   |
| Event 6:     | Handline Withdrawal                |
| Event 7:     | Pike Pole                          |
| Event 8:     | Equipment Carry                    |
| Event 9:     | Ventilation/Sled                   |
| Event 10:    | Victim Rescue                      |
| Conclusion:  | Post-Assessment and Rehabilitation |

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## II. POLICY

All uniformed FRD personnel are required to successfully complete the WPE as assigned, unless excused by the Fire Chief. Any personnel excused by the Fire Chief are to be considered non-operational until they have successfully completed the WPE.

## III. PROCEDURES

A. The sequence of events listed between Event 2 (Ladder) and the completion of Event 10 (Victim Rescue) shall be the designated timed events. The events shall be completed in a safe and proper manner within 10 minutes and 47 seconds in order to be successful. The Work Performance Evaluation Form (FRD-037) shall be utilized to record the appropriate information on each member during an evaluation.

B. The General Reasons a WPE Would Need to be Performed

- Recertification
- Return to Duty
- Reinstatement

C. WPE Recertification Period

Each uniformed member of the FRD shall be required to meet the annual designated cycle. This designated cycle shall be considered the WPE recertification period. The recertification period shall be valid only between the designated cycles. Once the next designated recertification period is announced by general order, any previous evaluations are no longer valid regardless of date. *(Example: If a member of the FRD has recently taken the WPE for a return-to-duty or completion of Recruit School and that member or members are approaching the next recertification period, their recent evaluation is not valid for that upcoming recertification period.)*

D. Pre-Screening Evaluations

Prior to the start of the WPE, each individual shall be prescreened with heart rate, respirations, and blood pressure readings. If these results are abnormal, an individual shall be referred to the PSOHC for a fitness-for-duty evaluation.

E. WPE Facilitation

Each Work Performance Evaluation shall be facilitated by a Peer Fitness Trainer. This individual shall be an officer within the FRD or an experienced Peer Fitness Trainer capable of handling the facilitation of a Work Performance Evaluation. This individual shall be appointed by the FRD Fitness Program Manager.

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F. Test Administrators

Every participant shall receive detailed, clear, and concise instructions from the test administrators prior to the start of the WPE. Test administrators shall escort participants throughout the entire WPE. The test administrators will consist of FRD Peer Fitness Trainers who are specifically trained in administering the WPE.

G. Injury During Participation of the Work Performance Evaluation

Injured personnel shall follow S.O.P. 02.03.01, Personal Injury Reporting.

H. Procedures for Unsuccessful Completion

1. Personnel who are unsuccessful in the WPE are to be placed on personal leave unless an injury is sustained and reported during the evaluation process. Personnel sustaining an injury during the evaluation process shall follow S.O.P. 02.03.01, Personal Injury Reporting. Unsuccessful completion may result from:
  - Medical Screening during Pre-Assessment
  - Physical Fitness Deficiencies
  - Injury During Evaluation Process
2. The Wellness Fitness Program Manager shall forward the results of the unsuccessful employee to a physician at PSOHC. The Wellness Fitness Program Manager shall ensure that appropriate information is completed in accordance with PSOHC Unsuccessful Completion of WPE Referral Form (FRD-039).
3. The employee shall report to the PSOHC on the day of the failure if it is during normal county business hours. If it is not during normal county business hours, the employee shall report to the PSOHC on the next normal business day at 0800 hours.
4. The physician shall meet with the employee to provide specific and detailed analysis of the WPE, using the results of the evaluation and the content of current and past physical examinations to determine if the employee is fit to continue performing in his or her present work classification. The physician shall advise the employee of the necessary medical follow-up or conditioning programs. A Work Status Notification Form (FRD-158) shall be provided to the employee. The results shall be considered confidential medical information by the PSOHC.
5. After the PSOHC evaluation, the unsuccessful employee shall provide the completed Work Status Notification form to the Deputy Chief of the Health and Safety Division.
6. Once the employee's work status is determined, he or she may be required to report to the Fitness Program Manager for a Peer Fitness Trainer assignment or training regimen. This will depend on medical clearance by the PSOHC physician.

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7. Personnel identified as being unsuccessful during an annual recertification period shall be placed on a Performance Improvement Plan (PIP) issued by the Deputy Chief of the Health and Safety Division. Assistance will be provided through the Wellness Fitness Program.
8. If any personnel are unable to complete their evaluation as a **direct result of equipment failure**, they may be permitted to perform another evaluation that same day. If not, they may be allowed to return to duty and reschedule another evaluation within a one-week period.