

# Service Standard 7.1.4

# Health Standards for Volunteer Membership

Version	1.0	
Policy Owner	Deputy Commissioner People and Corporate Services	
Policy Contact	Director Health and Safety	
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# 1. Purpose

- 1.1. The RFS has an obligation under the *Work Health and Safety Act 2011* to ensure that its members operate within a safe environment by taking all reasonably practical steps to minimise health and safety risk.
- 1.2. To effectively minimise health and safety risk the RFS must ensure that members meet minimum health standards appropriate to the demands and inherent requirements of the volunteer roles they undertake.
- 1.3. This Service Standard establishes the Health Standards for Volunteer Membership (the Health Standards) as a contemporary, relevant, and evidence-informed set of standards for assessing the health status of current and prospective volunteer members against the requirements of roles performed by RFS volunteer members.
- 1.4. This Service Standard will be reviewed twelve months from date of publication.

# 2. Policy

- 2.1. The RFS Health Standards for Volunteer Membership define the minimum health and medical requirements members must meet in order to safely perform the duties of specified volunteer roles. The Health Standards aim to:
  - ensure that members have the required health status to undertake duties safely
  - optimise membership participation by ensuring members can undertake roles appropriate to their health status, and
  - enable the RFS to make fair, timely, transparent, and consistent health assessments in the best interests of both members and the community.
- 2.2. The Health Standards consider the demands and inherent risks of each type of RFS volunteer role according to the relevant role descriptions and functional capacity checklists.

- 2.3. The Health Standards apply to all RFS volunteer members through health review referrals and all new applicants for volunteer membership of the RFS.
- 2.4. The Health Standards represent the minimum requirements for RFS volunteer roles. Specialist roles (e.g. Arduous Firefighting, Remote Area Operations, Structural Firefighting/Breathing Apparatus Operators) are subject to specific medical assessments which may involve the application of a higher standard than those defined in the Health Standards.

#### Roles and responsibilities

- 2.5. The roles and responsibilities of members, managers, the Health and Wellbeing team and other stakeholders are:
  - a. **Member or prospective member:** providing accurate and truthful information to the RFS to enable an assessment of their health status with respect to the role they have applied for
  - b. **Managers:** identifying potential injuries or health conditions, completing Health Review Referrals, and ensuring compliance with Health Management Plans
  - c. **Health and Wellbeing Team:** seeking and reviewing relevant information to disclosed injuries or health conditions provided by members and their health professionals in order to make assessments against the Health Standards
  - d. **Health professionals:** completing Medical Assessment Form Questionnaires and providing opinions on the member or prospective member's health conditions and risks.

#### Application of the Health Standards

2.6. The Health Standards assess medical suitability to perform the duties of specified roles. They do not assess the skills or capability of members to perform those roles. The Standards are applied primarily through the mechanisms shown below.

#### Health and Safety review for membership applicants

- 2.7. All applicants for new volunteer membership must respond to seven Health Declaration questions as part of the application process. The responses to these questions may initiate a Health and Safety Review consisting of any or all of the following steps:
  - a. Pre-screening questionnaire a set of questions focused on specific health conditions that the applicant completes,
  - b. Medical Assessment questionnaire a set of questions focused on specific health conditions that the applicant's doctor completes if required, and
  - c. The RFS Medical Consent form.

#### Health review referrals

- 2.8. Health review referrals are used to support members with an injury or health condition that affects their ability to perform the inherent requirements of their role.
- 2.9. District Managers may refer existing members for a health review based on a new or existing health condition or observed changes in functional capacity. Other members of the District can also raise concerns to the District Manager for final endorsement. A member may also self-refer to notify the RFS of a change in their health status.
- 2.10. An immediate risk mitigation process will be initiated to identify and manage safety risks while the health review is conducted. Risk mitigation may include adjusting or limiting the member's duties until an outcome of assessment against the Health Standards is determined.
- 2.11. The health review process may involve:
  - a. Requiring the member to complete any of the steps involved in the Health and Safety review for membership applicants
  - b. A Functional Capacity form or medical questionnaire being sent to the member's treatment provider for completion and submission to the Health and Wellbeing team.

#### Injury management

2.12. Where a member has incurred an injury or illness while volunteering for the RFS, the Health Standards will be applied to injury management assessment and return to volunteer activities as described in the RFS Health and Injury Management Program.

#### Medical assessments for specialist roles

2.13. Where a member is required to undergo a medical assessment for a specialist role or an Adult Pre-exercise Screening System (APSS) prior to undertaking an Arduous Pack Test (APT), the Health Standards will be applied to assess the members ability to perform their specialist role, as well as general firefighting roles.

#### Health Management Plan review

2.14. Members with a Health Management Plan may be required to undertake periodic reviews to ensure continued adherence against the Health Standards.

#### Outcomes of assessment against the Health Standards

2.15. A member or membership applicant who is assessed against the Health Standards will be provided with one of the following outcomes shown below:

#### Cleared for role

 Where a health condition meets the Health Standards and does not require conditions/restrictions to their membership, the new or existing member will be fully cleared for the role. Such health conditions are not considered to pose significant risk to a member's ability to safely perform the duties of the respective RFS volunteer role.

#### Cleared for role with conditions

 Where a health condition meets the Health Standards but requires certain conditions/ restrictions to their membership, the new or existing member may be cleared for the role with a Health Management Plan which details these conditions/restrictions.

#### Not cleared for role

 Where a health condition does not meet the Health Standards the member, or prospective member, may not be cleared for the role. Health conditions in this category are typically conditions that present a high risk of sudden incapacity to perform the duties of the respective RFS volunteer role.

#### Applying outcomes of assessment against the Health Standards

- 2.16. Where a membership applicant is not cleared for the role they have applied for and they do not wish to explore alternate roles, their application for membership will be declined or withdrawn after discussion with the applicant.
- 2.17. Members who are assessed against the Health Standards for a particular role may have resultant conditions/restrictions placed on any other roles, or they may no longer be considered fit for the roles they have previously performed. Where an existing member is not cleared for their role, suitable duties or alternate roles will be explored by the District Manager and the Health and Wellbeing team and offered to the member, where appropriate.
- 2.18. Where an existing member chooses not to accept the outcomes or alternate roles offered to them following the application of the Health Standards, stand down may be initiated. This will only be considered where all options to find a suitable role have been exhausted.
- 2.19. Members who wish to appeal an outcome must utilise the Medical Outcome Appeal form and provide new and/or novel medical evidence that was not considered at the time of initial assessment. This needs to be completed within 21 days of receipt of outcome and submitted via email to the Health and Wellbeing team at <a href="https://example.com/health/members/new-com/health/members/">health/members/</a>. Where required, the appeal will be reviewed by an External Medical Advisor.

#### Health Management Plan

- 2.20. A Health Management Plan is a document that outlines the relevant health condition and any associated restrictions placed on a member's volunteer role. The Health and Wellbeing Team develops this document, utilising the information received from a member's health professional.
- 2.21. Where relevant, a Health Management Plan may be put in place by the RFS. Any relevant conditions or restrictions placed on a membership will be defined in this plan, as well as the defined review period. This will enable the RFS to periodically review health conditions to assess changes to the status of the health condition and ensure that continued suitability for the member's role.
- 2.22. The Health Management Plan will be shared with the member, Brigade Captain, District Manager and placed on the members SAP record for visibility and to ensure their restrictions are clear when the RFS considers future activations or deployments. It is expected that the plan will be observed and adhered to at all times by the member whilst completing their volunteer role.

#### Failure to comply with the outcomes of the application of the Health Standards

2.23. Failure to comply with any conditions/restrictions placed on a member's volunteer activities following application of the Health Standards may result in the member being stood down from all activities and a disciplinary process may be commenced in accordance with Service Standard 1.1.34 Workplace Complaints Resolution.

#### Development and review of the Health Standards

- 2.24. The Health Standards have been developed in consultation with external medical advisors including specialist occupational physicians experienced in the management of health and safety systems for emergency services, and an RFS appointed working group including representatives of the Rural Fire Service Association (RFSA).
- 2.25. The RFS will update the Health Standards in accordance with best practice, contemporary medical research or medical advice to ensure the ongoing validity of the Health Standards.

#### Privacy and confidentiality

2.26. Any collection, use and disclosure of personal and health information is to be managed in accordance with Service Standard 1.1.14 Personal Information and Privacy to ensure compliance with the *Privacy and Personal Information Protection Act 1998* and the *Health Records and Information Privacy Act 2002*.

## 3. Document control

## Release history

Version	Date	Summary of changes
1.0	3 July 2025	Initial release

## Approved by

Name	Position	Date
Rob Rogers AFSM	Commissioner	3 July 2025

### Related documents

#### **Document name**

Work Health and Safety Act 2011

Privacy and Personal Information Protection Act 1998

Health Records and Information Privacy Act 2002

RFS Health Standards for Volunteer Membership

RFS Health and Injury Management Program

Service Standard 1.1.14 Personal Information and Privacy

Service Standard 1.1.34 Workplace Complaints Resolution

Service Standard 2.1.6 Volunteer Membership Applications