

FAIRFIELD COUNTY RURAL FIRE BOARD
GUIDELINES AND STANDARD OPERATING GUIDELINES

SUBJECT: INCENTIVE PAY RATE PROGRAM

The Fire Board of Fairfield County has established an incentive program to assist firefighter with the cost associated with attending meetings, training, and fire calls. Both firefighters and non-firefighters are to report to the incident commander or officer in charge and perform the duties assigned. Personnel not complying will forfeit payment for that call / training / meeting.

GUIDELINES:

1. Classifications:
 - a. Firefighter: Currently certified as an SC Interior Structural Firefighter (1131,1152, 1153, or 1154)
 - b. Non-firefighter: Active member with Fairfield County Fire Service.
 - c. All: Firefighters and non-firefighters.
2. Incentive pay rate and payment:
 - a. Fire calls-firefighter \$25 per call.
 - b. Non-firefighter and firefighters that respond to a call without bunker gear \$10 per call.
 - c. Meeting-all \$5 per approved meeting. Approved meeting includes monthly business meeting, limited to one per month. Must attend 80% of the meeting.
 - d. Training- \$15 per approved training class. Monthly department training and County Training sessions. Training sessions approved by the department office (hose test, dry hydrant, test new equipment, etc.)Must attend 80% of the training session. For reimbursement purposes the fire academy training shall be considered one county training.
 - e. Medical Calls – those that are DOT 1st Responder Certified or equivalent will receive \$15.00. Those that are non – certified will receive \$5.00.
 - f. Wrecks (10-50) – Firefighters that respond to wrecks with injuries will be paid \$15.00.
 - g. Maximum compensation is total of \$250.00 for all items occurring in one month. The first day of each month starts a new compensation period.

- h. Double duty-fire, police, or emergency services personnel that are on duty at the time of a call or training session, will receive credit for attending, but will not be paid.
 - i. Payment-the incentive will be paid annually. Personnel will receive the first \$360 tax free, all incentive compensation after the first \$360 will be subject to Federal and State taxes.
3. The Fire Board will perform quarterly audits to insure compliance with the program. Any department or individual found to be in violation will be subject to losing their rights to incentive payments and criminal charges may be filed.
4. Fire department duties:
- a. Prepare Personnel Report (Attachment 1). Department shall use the computed generated Monthly Fire Report form provided by the Fire Marshal's Office. This is completed by the chief, officer, or highest ranking department person in charge of the fire calls, training, or meetings. Each person should print an initial next to their name in the provided space. Officer in charge will line through black spaces to insure no names are added to the report after the fact. Personnel Reports for fire calls will be filed with the fire incident report. Personnel Reports for meetings and training will be filed in the Personnel Report File. Unless instructed otherwise, all personnel must report back to the station after a call to return trucks and equipment to a ready status.
 - b. Prepare and submit Monthly Fire Reports (Attachment 2) to Fire Marshal's Office no later than the 15th of the following month.
 - c. Maintain copies of Personnel Reports and Monthly Fire Reports.
5. Fire Marshal's Office duties:
- a. Collect Monthly Fire Reports (Attachment 2)
 - b. Generate monthly reports to Fire Board
 - c. Generate quarterly reports to Fire Board and Fire Departments
6. Fire Board Duties: Appoint an incentive committee.
7. Incentive Committee Duties:
- a. Oversee the incentive program.
 - b. Perform random quarterly audits of the program and report any discrepancies to the Fire Board for action

SAMPLE ONLY – USE FORM FROM FIRE MARSHAL’S OFFICE
Fairfield County Fire Service

Fairfield County Fire Dept. Personnel Report

Circle One: Meeting Training Fire EMS

Region: _____ Date: ____/____/____ Station# _____

Instructor: _____ Hours _____

Topic: _____ Description: _____

Print name and initial

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Officer: Print Name and Sign: _____

SAMPLE ONLY – USE FORM FROM FIRE MARSHAL’S OFFICE
 Fairfield County Fire Protection Board
 Winnsboro, SC 29180

Station #	Name:		Month:						
	Primary	Secondary	Last	Fire	Training	Meeting	Medical	10-50	SCFA
	Residential	Residential							
	Mobile Home	Mobile Home							
	Multi-family	Multi-family							
	School	School							
	Church	Church							
	Motel/Hotel	Motel/Hotel							
	Commercial	Commercial							
	Barn/Shed	Barn/Shed							
	10-50	10-50							
	False Calls	False Calls							
	Vehicle	Vehicle							
	Boat	Boat							
	Woods/Grass	Woods/Grass							
	Smell of Gas	Smell of Gas							
	Dumpster	Dumpster							
	Rescue	Rescue							
	EMS	EMS							
	10-85	10-85							
	LZ	LZ							
	Other	Other							
	Total	Total							
	10-22	10-22							
	Structures	Structures							
	Woods/Brush	Woods/Brush							
	Vehicle	Vehicle							
	10-85	10-85							
		Injuries							
		Civilian							
		Firefighters							
		Deaths							
		Civilian							
		Firefighters							

Comments: _____

Name of person completing the report: _____ Date: _____ Phone: _____