Charlie Palmer: Welcome to on the line a podcast for today's wild land firefighters. Not a great deal is known about injuries and injury prevention in wild land firefighters. It just has not been a very active area of research. But thanks to the two ladies we have in the studio today that is improving. Dr. Valerie Moody is a professor in the Integrated Physiology and Athletic Training Program at the University of Montana and she is the director of the athletic training education program there. And Bella Callis is one of the graduates of that program and an active practitioner in researching injuries in the wild land firefighter population and then also providing care to those folks as well. So Val and Bella, welcome to the podcast. Thanks for having us. Thank you. All right, so value, we're on the podcast in season one talking about this subject, that subject being injuries in the firefighter population, but for a review of that or in case the listener didn't tune in for that one, what can you provide in terms of an overview?

Valerie Moody: Yeah, sure. So looking over the last few years, a lot of our work has focused really on getting a better understanding of types of injuries that wild land firefighters sustain and looking at different reporting mechanisms for those injuries. Because as you said, there's just not a lot of information out there. And when being tasked with the charge to decrease the number of injuries that these individuals sustain we have to understand what's going on. And so when we look at what we do know at this point, a lot of what we know is relied heavily on self-report of these injuries from wild land firefighters and majority of them of what they're reporting are injuries that are musculoskeletal in nature. And so a lot of joint and muscle injuries, sprains and strains. And we know that there's also a gross problem with under-reporting because they want to stay out and stay active and be part of their crew throughout the season.

Valerie Moody: And so just learning how to address those issues has become critically important. And then looking at how maybe the athletic trainer can help facilitate keeping them out and keeping them healthy while they're working throughout the season. You know, from the forest service standpoint we know that the cost of injuries rising exponentially throughout each season, particularly as the seasons get longer and more complex fires and you know, it's basically becoming a year round activity for these individuals. So just trying to look at ways that we can to help these guys stay active and just keep them healthy and working on the line is important.

Charlie Palmer: Yeah. And if, if the majority of these injuries that are musculoskeletal in nature, that's just right in the wheelhouse of the athletic trainer.
Valerie Moody: Yeah. To me it's exciting. It does scream athletic training, particularly a lot of these injuries are lower extremity. Yeah. They're, we're seeing so low back, hips, knees, ankles, and so to me, you know, and interjecting, intervening with an

Charlie Palmer: Athletic trainer that, you know, they're experts in working with musculoskeletal injuries and looking at ways of preventing these injuries, it seems like a great fit to look at how they can fit into the culture. Of all that fire. So Bella, there's all sorts of other populations that are kind of in the process or at some level experimenting with the usage of athletic trainers. The military has been real active lately. Some police departments are utilizing them. Some occupations have recognized that having an athletic trainer around is as beneficial in terms of injury prevention and injury treatment. So what do you have in terms of kind of talking about some of these other populations?

Bella Callis: As far as military goes, the Marines are probably one of the bigger groups that have recently made a bigger drive towards integrating athletic trainers more. They've invested millions of dollars up to 8.6 million a year. They have a four year plan ahead of them to increase the athletic trainers to being as much as they can with each group and just trying to replicate more of the college setting or the high school setting where they're there. They're on the sidelines as you can say, for those different tactical groups so they can help with injury. Prevention is probably one of the biggest pieces for them, especially cause they're trying to reduce attrition and lost work days associated with the musculoskeletal injuries and just increase their operational readiness for those crews. And so the Marines are probably one of the bigger advocates, I suppose for athletic training and integrating into the tactical athletes setting.

Charlie Palmer: Yeah. So they started with the like a little over a million dollar investment and then this year it steps up to about four and a half million or so. And then in 2020 and 21 and 22 they've, they've allocated over $8 million each year. So that's about a $30 million investment over a four year period. Why are you, why do you think they've, they've obviously decided this is really important for us to do in our populations.

Bella Callis: Yeah, I think they just see the need because if they're losing their candidates or they're losing their, their guys on the line, then they're not going to be able to operate as they need to. And so they see the need for keeping people working, which is a lot of what athletic trainers can do. Like Val was saying is we can keep you healthy, we can maintain an injury that might not need to keep you out as long as maybe past methods have done. And so I think we can build a case for ourself pretty quickly in those tactical settings because we can help you along the way and keep you active and working.

Charlie Palmer: Yeah, and maybe we need to back up a little bit and because just from being around and talking with other folks and trying to get a gauge on the general population, there's confusion from some as to what an athletic trainer even is, right? A lot of people think, well that's a personal trainer or that's a trainer who
trains athletes. Can we provide kind of a working definition for folks who, who might not really know what an trainer even is?

Valerie Moody: Right. Athletic trainers are healthcare professionals and typically they'll have a master's degree for training. And they really are the frontline, if you will, in terms of providing medical care for traditionally what's been viewed as an athletic population and looking at the injury prevention, acute care and then also looking at diagnosis and rehabilitation of athletic injuries. And you see athletic trainers broadening that scope a bit to really different populations so you can find them working in industrial settings and as well as the athletic settings in tactical athletes. So working with fires, structural fire, wild land fire now, but then even looking at performing arts and some of those other settings that aren't as traditional, if you will, which might be like a dancer. So you see them working, you know, with performing arts, dancing. Cirque de Solei has athletic trainers that work for them. And then just looking at different settings like NASA, they have an athletic trainer, Boeing rework work fit has athletic trainers that are working with their employees to help keep them safe and active and, and working. And so I think that's one piece with my Bella was talking about, particularly from the military standpoint, is when you look at the cost to recruit these individuals and train them and incorporate them into the military system, it's an expense for the military. And so whatever they can do to try to, to keep these individuals active and avoid the, the loss of costs, if you will, if that individual isn't functioning, that's important. So it's a worthy investment for that reason.

Charlie Palmer: And then not only is it showing to be cost beneficial, it's just right practice, right? I mean it's taken care of the people who are engaged in, in difficult duties.

Valerie Moody: Absolutely. Kind of going back to a bellow is saying is that the athletic trainer becomes part of the medical team. And so there are systems that have been in place in, in the past. And so this is looking at how you can improve and add to that existing model of healthcare for the military or for other individuals. And it's filling a gap that's needed in a service that was needed that wasn't being addressed before. And so yeah, it's a complimentary addition to the health care team and not something that's replacing the existing model itself.

Charlie Palmer: And in that Marine model, they've initially, if I understand it correctly, they've, they staffed their recruit centers so that the new hires that would come in, that's where the initial athletic training footprint was, and then they've broadened that out to start pushing these athletic trainers out to the expeditionary forces and the other groups within the Marine kind of chain of command. So that not only is the new recruit getting those services, but so is the fully active and operational Marine. Is that accurate?

Bella Callis: Yeah, definitely. Just trying to reach out as much as you can and to be able to continue on with those different individuals that are needing that care, especially over time I think is more important even than just the initial like, yeah, it's, it's good to get them care right away and introduce them to that type
of medical professional and to help them with injuries or prevention is a big deal. But being able to put athletic trainers out with them consistently, I think that has an even greater outcome than just the initial part. So it's good that they're, they're increasing their people cause they're increasing the numbers I think, which is a big part of where the money comes from is just trying to get more athletic trainers under their care and so they can get them out to more of the individual groups and just be more person to person a better ratio of health care provider to the individuals that are helping.

Charlie Palmer: Like that college athletic model that you mentioned where there's athletic trainers with teams and all of that.

Bella Callis: Yeah. And you're the point person. So I can always, they know who to go to. If they're having, whether it's a big issue or a small issue, they can at least have a good starting point. And then the athletic trainer, as Val was kind of describing in my mind, is always a great kind of middleman of being able to help connect you to different resources. But then thatletic trainer themselves can also take on those duties and help, you know, rehabilitate injuries or to help with the prevention pieces and give you a starting point and then maybe progress further to seeing a physician or whatever it may be. But it's such a great integration of a medical professional that's just there right away. It's good access. And that's I think one of the biggest pieces of an athletic trainer is having access because then you have that ability to say start right away with care rather than having to wait for, you know, an X Ray or a doctor's appointment to then kind of get rolling with things. You can start that day with the care, which is important.

Charlie Palmer: And that's presuming you went in to get that care right. With an athletic trainer. It's like, Hey, this person's here, I've just got something that's going on. I can just real quickly consult with them and get some ideas on what might be happening. Yeah, exactly. Okay. And in that Marine population, those spokes are called SMIPs, is that right? Sports Medicine. Injury Prevention. So just so we're clear on the acronyms and if you ever hear that, you know that's what that person is. What about some of these other populations? What else is going on in terms of athletic training and in other professions?

Bella Callis: Yeah, so the police academies or police departments are starting to integrate athletic trainers in Fairfax County. They have a injury care and prevention program as well. They're seeking after the same goals, reducing time loss from injury, whether that's a injury that happened during work or off of work. They're trying to reduce the time loss from that. And then they're just also trying to help educate the police horse on how to help with injury prevention and just what to do to help keep you working. So that's what the Fairfax County is all about. As far as other forces or other areas at Indiana state university, they are also beginning to integrate athletic trainers into structural firefighters settings. And what they are doing is they are hosting a four hour clinic every day in a lab at the university and free service for the firefighters to seek medical care. Whether it's for an evaluation for injuries or maybe things they're hoping to prevent, they can go there and seek that service to help find some answers.
Bella Callis: Dr Kenneth Gains is the head of that. He's really been the one to progress that program at the university, which is really great because it's a good starting point again for building that relationship between firefighters and athletic trainers and just trying to integrate those two professions together, which is a great model for us to kind of look at with while in firefighters, instructional firefighters. And they've also done a couple of the research projects too that have kind of helped us maybe look at different areas that we could look at for research when the wild land firefighters setting cause they're looking at like how PPE affects the way that structural firefighters move and things along that line that we can kind of seek out too except in the wild and firefighter city.

Charlie Palmer: So in that case, structural fire might be a good surrogate model in some ways. And then other ways that may be the wild land world is different enough where how they provide the care might not necessarily fit perfectly for, for a wildland population. So Val, what can you tell us about the benefits of integrating these services? Obviously with some of these other groups making massive investments into it, they believe in it,

Valerie Moody: Right? Yeah. I think, you know, when we're looking at these groups that Bella talked about, there's several others across the country as well that have surfaced integrating athletic trainers into structural fire communities as well as the police and obviously the military across the country. And so when we look at maybe the last 10 years of data looking at investment into these types of programs, the individuals with their reporting, these agencies are seeing huge returns on their investments. And so there was a survey I think about five years ago looking at basically what was the return on investment for your agency by investing in integrating athletic training services. And by far a hundred percent of those organizations said they had a favorable return on investment. And then when you look at like the Fairfax and police department, they reported that within the first year they had decreased almost a hundred percent their workman's comp claims.

Valerie Moody: And obviously that's a huge expense for agencies and a big concern. We're dealing with injuries and then they looked at the number of musculoskeletal injuries sustained and those decreased significantly. And then they also cut their medical costs by almost 50% by integrating athletic training services. So again, just from a business model standpoint, it certainly seems to make sense when you look at integrating an athletic trainer and the investment it takes to do that and what you're out of that investment. They've also seen decreased amount of time that their employees have lost. You know, in terms of work time and obviously in wild land fire, that's a big deal. You know this for a lot of wild land firefighters being out on fire is their livelihood and time is money. And so it's really important to be able to keep wild and firefighters active and healthy and able to be able to work at their full capacity.

Valerie Moody: And so when we look at these other models, you know, ideally you can infer that integrating an ATV might benefit us in that way. And then obviously just having direct access right to that provider as we talked about. And so when you
look at other traditional models, whether it is an athletic setting or a tactical athletes setting, you know, being able to have somebody, you can just go ask a question too big or small, right? So if you're out on the line, Charlie, and you're jumped into a fire and something had happened, you know, and you'd want to know, is it okay for me to be able to keep going or is this something I should really have looked at? It just, it's a nice resource to have available to you and to have that knowledge and have that provided right there. And then if it is something small, like you're going to be fine, Shirley, you know, you're, you're good to keep going. Or, geez, I really think you should have this look at that, you know, we're able to answer those questions. And so I think just having that immediate access is really important.

Charlie Palmer: Yeah. When I was jumping, we actually had an athletic trainer. It wasn't by purpose, it wasn't by funding or anything. It was just so happened that he had athletic training qualifications and just happened to be jumping at the same time. And I will admit I used his care on more than a couple of occasions because it was super convenient to get that assessment of, in one of the cases it was, I had sprained my ankle really badly and was like, you know, I've done this in basketball before. I kind of know what this looks like and I know this one's kind of serious. And it was great having him just to be able to kind of provide the assessment like, Oh, you're going to be okay, but it's, here's some treatment things you can do. And that really, really helped keep me operational and keep me going. So it was anecdotal of course, but just a tremendous experience on my part with it.

Valerie Moody: Yeah. But it's a great example because I think that happens more often than not. Wildland firefighters sprains their ankle. Yeah. Often they self treat because they want to stay out and so just having somebody that's available to them to be able to answer those questions, give them some advice and perhaps do some sort of intervention while they're out there to help facilitate to keep them operational is important as well.

Charlie Palmer: Yeah, that's Kurt Rothwell shout out Kurt. Thanks. (Good job Kurt). And then also, as you mentioned, these are typically masters level trained people, which means they have a lot of other really unique training and education as well besides just the injury prevention and injury treatment side. So you're not only getting that, you're getting somebody who knows about nutrition and some of the psychological components with stress and maybe how to reduce some of that and concussion education, concussion management, and another just kind of general health education. So again, what you're getting with a certified athletic trainer is really pretty significant.

Valerie Moody: Yeah, I would agree. And I think, you know, as Bella alluded to, they know a lot of information but they also are very well connected in the medical community. And so being able to recognize if there is potentially a medical issue that needs further evaluation we're able to connect them to those resources. So whether it is a mental health issue or a nutritional issue, the athletic trainer is first in those areas, but certainly not the experts in those areas. So just being able to
recognize when additional resources are needed I think is also a huge benefit. Looking at the holistic care of the wild land firefighter.

Charlie Palmer: Yeah. And then to probably have a good idea of who some of those resources are right. To be able to connect with them. As you said...

Valerie Moody: Just tell him to call Charlie.

Charlie Palmer: Right. So Bella, you've been involved in now for almost a year, a really fascinating project and that project has funding for another year. So you're going to get a chance to continue doing it and to gather some more data. But you've been involved in providing care out at the Missoula smoke jumper base here in Missoula, thanks to Tory Kendrick, the base manager and then to the operations form Ms. Louis Fleming for kind of greasing the skids and helping this get started and helping us kind of establish this footprint out there. But what can you tell us then about your initial work out at the jumper base in terms of providing athletic training services to this specific tactical population?

Bella Callis: Well I've had two priorities out of the base. One is definitely the injury prevention side, so we've been taking smokejumpers through the movement and mobility screens. Just get a good sense of how they can move through different motions and then I will follow up with them and give them some exercises that they can integrate into their PT or physical training time to just really focus on the prevention, giving them some work for a starting point to just keep them working. So that's a big focus. But then the other focus has been just introducing athletic trainers to, while they are firefighters and specifically smokejumpers. And so it's been just a learning experience for me to just kind of see how we can integrate athletic trainers into this setting. But then it's also a learning experience for the wild land firefighters. Just kind of getting to know what an athletic trainer is, what services I can provide.

Bella Callis: It's been really cool to just see the different conversations that I have with folks at the base and seeing what care they are seeking out of me and just the questions they have. It ranges from the smallest things, like what do I do for a tight hip flexor? That's not something you might necessarily go to a physician for and go seek out a doctor's appointment, but a great person that you can just walk up and ask that quick, be like, okay, I'll show you a couple things and then move on, check in in a week and see how they're doing. And most of the time they're doing pretty well. Like they, that's all they needed and they're feeling great. So it's been a great introduction, I think so far and I'm, I'm really happy with all of the positive interactions. It's, it's all been super positive and so many folks will talk to me and I'll explain what I'm doing. Cause you know, I just, I hang out around the weight room, I have been posted up at my little table I have and waiting for guys to come up and ask me questions or do a screen with them and they'll just come up and ask me even what I'm doing too and who am I, what's my job? And it's cool to introduce athletic trainers to them and then explain what services I can provide and then really cool conversation will blossom from that. And it's just really cool to kind of be that they're interested.
Charlie Palmer: Yeah. And so from an actual mechanics or logistics standpoint, you've been out there since April and having a presence as a huge piece of this, which just means you're around and the more you're around ideally than the more comfortable the folks are with you as just being a resource that's here. And then as the season progressed, your footprint got bigger and bigger. Is that correct in terms of how much, in terms of how much time you were there? Right. It was purposefully scheduled so that as the season became more intense, although the season wasn't really very intense this year, at least down here you were more and more available.

Bella Callis: Yeah. Which I think was really helpful for people. I feel like I got integrated more too as I was more consistently there cause I could help. They do a six minutes for safety at their daily briefing in the mornings and so I got to speak at a few of those, kind of do some patient education pieces that that I got to go watch a bunch of practice jumps and just kind of just a variety of ways that smokejumpers would see me and be like, Oh, Bella might know something about that and just being present. Yeah. I would go to in the morning briefings every day too and just try and soak up as much as I could of their environment and try and just see how they function to then hopefully just input myself as much as I can through those little, those little gaps that I see that I could fit better. And so I think yeah it definitely has my time increased at the base in the summer. The, the amount of people that would come and see me and come talk to me increased a lot.

Charlie Palmer: So at least two parts. Right. So kind of the assessment side with the mobility screening and that then gives you an idea through scoring and through a metric as far as how well they did an idea of how good they are, how solid they are in certain movements and maybe not quite as solid and other movements. And then that allows you to target through some exercises and activities how to improve that.

Bella Callis: Yeah, that's, yeah, that's exactly what the screens were meant for was to just mostly not to tell how good or bad of you you are in a physical state. Cause I feel like that's my what turns some people away. It'd be like, Oh well she's just gonna judge me on how I move. It's not a judgment. It's just me trying to assess and just get a great idea of what your focus need to be to help prevent you from getting injured. A lot of them were lower extremity related movements just because that's what we've seen in the literature is the lower extremity injuries in the wild land firefighter sitting as a whole, so we kind of led the movement screen to replicate that and focus on those pieces as a start for this fire season and we could assess how they move with their lower extremity and then focus on a lot of hip mobility, hip stability.

Bella Callis: Just the small things is really what I kind of integrated because a lot of those guys, like I said, I sat outside the weight room all summer and just kind of getting an idea of how they train and get ready for their job as they see fit. It's just the small things that maybe that they might not think about to integrate into a workout regimen. And even just as simple as doing a warmup, a dynamic
warmup to kind of get your core muscles warmed up, activated, ready to go before you go for a run, before you go throw on weights on a squat rack. I tried to just give a lot of the small things as my exercise prescription and trying to focus on how to make those areas better for them through the screens.

Charlie Palmer: And then the other piece is obviously the, the kind of education and the, and the treatment of care of any issues that they might have going on.

Bella Callis: Yeah. Yeah. And there was, I got a lot of questions about very simple nuances that they might’ve noticed and I did have a couple injuries that came and see me consistently throughout the season too. And I think they become big advocates for how we can help with those pieces. But patient education as a whole was, I think the biggest piece of me being out there. Because during those six minutes for safeties, I tried to focus on more broad areas that are really easy to just kind of bring to attention. Though I did a concussion assessment like how you on the line can help your fellow while they have firefighters. Maybe assess your coworkers for a concussion and see if they need further medical attention for that. That's all I got for questions was what's the benefit of icing versus heating. That’s that even just simple, simple in my mind that the easy piece to just talk to someone about and educate them on.

Valerie Moody: Yeah. The other piece too, I would plug in villas, particularly with your presence at the morning safety briefs was just even having exposure to other wetland firefighters from other bases as well. Yeah. Them being able to come ask you the questions and do the screens and yeah. Following up with them even though they weren't in the Missoula area. Yeah. I did have a handful of people that would come up to me and be like, Hey, I'm based set of Grange velour, West Yellowstone, but I heard about you and I would really love to hear what you have to say about my shoulder or whatever it may be. That was a big piece too definitely and it was what we were talking about previously was is this something that I can work through or do I to stop and go see someone. Now that was another big education part but also a injury management piece of just helping figure out what’s the next step in this injury process for me.

Charlie Palmer: Yeah, and and again probably to important to stress is this isn’t replacement of anything that’s been done or has been done is not getting rid of medical care. The idea that you might have something where you just have to go in and see a doc, this is an augmentation and an improvement hopefully of a system that already exists

Bella Callis: Complementing and already existing.

Charlie Palmer: Yeah. So vow to kind of look to the future and obviously there was another year with Bella out at the base and, and with an opportunity to continue this provision of care and continue these assessments and hopefully make the footprint bigger and deeper and all of that. But kind of looking towards the future, what do you see in terms of how athletic trainers are used in this wild-land population?
Valerie Moody: Yeah, so I think, you know, particularly this year with Bella out on the base coming up, we’re going to start earlier having a presence. So we've talked about, she’s just wrapping up at the base this week actually. And then starting back up at the base in March, which is earlier than we did last year. Hopefully catching some of those wild land firefighters before they really get active into the season and doing some of those movement assessments early in, getting them their exercise prescription integrated, but then also looking at expansion of services. And so we looked at, you know, what we could provide this year comfortably in terms of just movement assessments and injury consultations. You know, the question now begs, could we really look at providing treatment for those injuries and day to day care. So it looks more like a traditional model of having an athletic trainer, letting them work within their full scope of practice.

Valerie Moody: And so those are things we're working towards. And I think if that's something that we're able to do moving forward, then the impact is going to be much larger in terms of being able to provide treatments in, in those services on a day to day basis. And then obviously looking beyond the Missoula smoke jumper base, you know, integrating a T in the fire. I think the biggest thing is, you know, we still need to get a better understanding on injury reporting and trying to develop a system that's a little bit more uniform so that we can get a better handle. Cause as I said before, it's, it is largely self reported at this point. And so trying to establish some sort of database or method of collecting the information across the regions so that we can get a better handle on that part. So that's the first step I think is, you know, just looking at documentation and trying to get more uniform information.

Valerie Moody: And then I think looking at ways to integrate athletic trainers on site and getting that access to care for wild land fire and however that may look. But certainly looking at different ways, whether it’s on other smoke jumper bases to start or embedding them within crews. Yeah. And then you had talked about this in the first podcast in season one that you did there just as not a great or any unified injury surveillance system in place for, for a wild land fire. It's tough. There are some forms, but right now they're not mandatory I think for filling out. And then some of the information off that form that does exist really doesn't focus specifically on musculoskeletal. And so it does looking at the, you know, acute care where they medivaced out or some of the more severe traumatic type injuries and not the day to day routine kind of aches and pains that the, the wild land firefighter faces pretty much on a day to day basis.

Valerie Moody: We don't have a good handle on that at all. And I think the bigger challenge too is all the different agencies, right? That that play a part in wild land fire and just trying to get everybody on the same page there is a challenge for sure.

Charlie Palmer: Yeah. And in this military model where they have at least initially started by just basing the ATS at the training centers, that that doesn't right away. Then there, that’s a disconnect from the, from the wild land side is we don't really have
unified training centers where all new recruits go there before being doled out to their units or whatever.

Valerie Moody: Yeah. No, I agree. And that's part that it's a challenge and it's frustrating at times because we, we do look at all these other models and how successful they've been. And then you tried to translate that to wildfire and you're like, that's not gonna work.

Valerie Moody: And that's not gonna work. And just because it doesn't exist and it's just a different, unique animal to look at. And to me that's the exciting part because I think it does allow for some creativity and innovation and trying to develop some different models that may work. But right now, you know, we're looking at that and trying to figure out ways to implement. We did try two years ago we developed a form to integrate so that EMS basically in camp could fill out the form for us and try to get a little bit more information on musculoskeletal injury. And we didn't really get too far with that form cause it was just kind of a trial. But again, just trying to to figure out different ways working with different agencies to do that.

Charlie Palmer: Yeah. Like with Bella's case at with the roughly 70 or 80 person smoke jumper base fits really well. Right. That's a pretty good contact number in terms of how many people and how many providers. But then you get to a 20% hot shot crew or a 10 person hell attack module or something, then it gets tougher, right? Because who, who all is that person gonna go see. And where's that [inaudible] going to be stationed? Or how does the care and the delivery look and who's the population?

Valerie Moody: And I think that's going to vary by region. You know, so if you're looking at integrating athletic trainer in California, that might be easier if you're looking at having one athletic trainer for every 80 to a hundred wild land firefighters and that's just the number thrown out there. But that's fairly common in athletic or high school population.

Charlie Palmer: You could have five hot shot crews in a pretty condensed area. Geographically and in pull it off and then that would work.

Valerie Moody: But if you have something more like Montana and you've got, you know, four or five hot shot crews across 500 miles, that's a little more travel. That is a little bit more travel. Yeah. So those are some of the challenges you have to look at it. So I think for us at least starting at the bases makes sense. And maybe integrating something into like the academies and some of the educational pieces would make sense to just to get a footprint and then maybe get some early adoption into what we can do. And then looking at ways to incorporate them more specifically with crews, which obviously is going to be more significant investment.
Charlie Palmer: Yeah. Perfect world where you’ve got an 80 on a 20 person crew. Is that a perfect world?

Valerie Moody: I think that’s awesome, I mean if you do, if you look at their, they’re a firefighter probably. Yeah. If that have to be to roll with the crew. So if that’s the case, then you know, looking at longterm, you know, we’ve talked about that. It’s just so yes, obviously there’s this finite season, but what about after that season? You know, what kind of care does that crew receive? Could the athletic trainer follow them throughout the year and provide that care? And then even looking longterm health of the wild land firefighter and looking at their musculoskeletal health. I think there’s been a lot of focus on other areas of their health. But that’s also a piece that’s important to keep them active throughout their lifetime when they’re done being a career firefighter and obviously they’ve got a lot of good years left and we want to try to keep them active and healthy throughout their life and just looking at the longterm impact, I think that an athletic trainer could play with early intervention could be critical. I think that’s a great wrap up right there.

Charlie Palmer: Why don’t we leave it at that? All right ladies, thanks for coming in today. Fascinating stuff, Bella. Good luck with the continuation of year two. We’ll follow up and touch base again on a future show and just kind of see how things are going. Thank you for listening to on the line. We will catch you next time as we continue along with season 3.

Charlie Palmer: You’ve been listening to on the line, a podcast for today’s wildland firefighter, our audio engineer’s Mike Matthews, production assistant Joey Moore, and I’m your host, Charlie Palmer. Thanks for listening and we hope to connect with you again On The Line.

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