

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
FIRE AND EMERGENCY MEDICAL SERVICES
DEPARTMENT**



**Fiscal Year 2017
Performance Oversight Hearing**

Testimony of
Gregory M. Dean
Chief

Before the
Committee on the Judiciary and Public Safety
Council of the District of Columbia
The Honorable Charles Allen, Chairperson

John A. Wilson Building
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Good morning, Chairperson Allen, members and staff of the Committee on the Judiciary and Public Safety. My name is Gregory M. Dean, and I am the Chief of the Fire and Emergency Medical Services Department. Thank you for inviting me to testify on behalf of Mayor Muriel Bowser in today's hearing to discuss the activities and accomplishments of the Department in Fiscal Years 2017 and 2018, to date. For those of you watching from home, my testimony is available on the Department's website at fems.dc.gov.

Our Department's performance continues to steadily improve thanks to the support of Mayor Bowser, this Council, our labor unions, our stakeholder partners, and the hard work of our members. In 2016, I testified about our efforts to stabilize our Department and EMS system after a difficult period that saw an ever-climbing call volume and a lack of resources. In 2017, I talked about our work on the fundamentals, from hiring to vehicles and to training. Today, I am here to tell you that our work over the last three years, as well as the Mayor and Committee's support and financial investment in this agency, is paying dividends. We are not only doing better in many areas, but this year we are poised to launch some significant initiatives that will propel this Department to a new level of excellence in performance.

Mayor Bowser's Fiscal Year 2017 Budget reflected our deep commitment to DC values by making investments that will provide all residents of the District of Columbia with the opportunity to succeed. We remain focused each day on creating pathways to the middle class by investing in education, affordable housing, infrastructure, public safety, and people. The Mayor's investments have bolstered FEMS service to District residents. My testimony today will outline that service, with a focus on fire suppression and firefighter safety, special operations and fire prevention, organizational development, and emergency medical services.

Fire Suppression and Firefighter Safety

Fire suppression training, operations, and safety have been priorities of mine since my first day with the Department. Fires account for only twenty percent of our calls, but fire suppression is the work that is most dangerous for our members. Recent feedback from our employees made clear that they are eager to get more training in fire suppression, above and beyond the daily company-based training that happens in our fire stations. For these reasons, we are renewing our focus on this area in FY 2018.

Last fall, we finished a comprehensive review and revision of our fire ground Standard Operating Guidelines (SOGs). Our major objectives with this initiative are compliance with National Fire Protection Association (NFPA) standards,¹ improving Company Officers' decision making ability, incorporating recommendations from past after action reports, and aligning our guidelines with modern building construction and fire behavior. To support the revisions, we developed an in-depth training program. Each Chief Officer attended an eight-hour class prior to beginning the company-level training. Additionally, each operational member will be rotated through a four-hour training session prior to final implementation later this month. We believe these new SOGs will further develop our Department mid-level leaders and also improve firefighter safety.

¹ NFPA 1561, Standard on Emergency Services Incident Management System and Command Safety.

In the area of fire-related training, in FY 2017, the Training Academy delivered in-service training on Engine Company operations, pumps, and hydraulics training, as well as Self Contained Breathing Apparatus (SCBA) sustainment training. The Academy also hosted several National Fire Academy (NFA) trainings on-site.

In FY 2018, the Academy will continue the Engine Company Operations, SCBA sustainment, and NFA training. It will also offer a new module on multi-company fire evolutions, incident management training, and a number of special operations certification-level trainings, including in technical rescue and hazardous materials.

To be successful at fire suppression, of course, we need reliable apparatus. As you know, strengthening our Apparatus Division and rebuilding our fire apparatus fleet and reserve capacity has been a significant effort over the last three years. Since last year, we have reduced our number of Division vacancies and have increased the number of mechanics with certified training.

Last year, I testified that we had met our “up time” goal of 75 percent for ambulances. While we have not yet met that goal for fire engines and ladder trucks, in FY 2017, we achieved some progress with improving availability. We added three refurbished engines, one refurbished ladder truck and 18 new ambulances. We are doing the best we can with preventive maintenance, given the age of our fire apparatus, but recognize we have room to improve.

We expect more progress in 2018 as the Department sees a significant influx of new fire apparatus. Between now and June 2018, we expect to have 18 new fire engines delivered. In addition, by the end of FY 2018, we will receive one new ladder truck, one refurbished fire engine, seven new ambulances, one new hazmat truck, one new hazmat support vehicle, two new air units, seven new command/supervisor vehicles, and 10 new support vehicles.

We can also improve fire suppression through better fire dispatch. In September 2017, we worked with the Office of Unified Communications (OUC) to launch revised fire and rescue incident response plans in an effort to preserve fire resources by matching the right apparatus packages to fire, rescue, and hazardous materials incidents. We also developed training for OUC employees on the new response plans, our new SOGs, and a refresher on our operations generally.

In the area of firefighter safety and risk management, we elevated the Safety Officer position from the rank of Captain to Battalion Fire Chief because fire-ground and incident scene safety deserve the maximum level of attention and authority. We also implemented new air quality monitoring and rehabilitation policies and procedures for fire-grounds.

In FY 2017, we began implementation of the new presumptive disability law for certain cancers and have shared a draft revision of our policy for infectious disease with our labor unions. In addition, we purchased over 1,200 new sets of Personal Protective Equipment (PPE), or turnout gear, and will purchase another 740 sets this year. This multi-year effort will ultimately ensure that all of our members have two sets of gear as required by our collective bargaining agreement with Local 36 and as recommended by NFPA standards. We also inventoried all SCBA

harnesses and air cylinders within the department and re-established a strict annual SCBA flow testing schedule by battalion.

We finished our driver safety awareness training course, which may have contributed to a decrease in the number of accidents in FY 2017. The number of accidents continues to be too high, however, and we need to remain vigilant in following our safe driving procedures. All of these efforts show our commitment to doing everything we can to ensure that each of our members goes home safe after every shift and also enjoys a healthy and long retirement.

Special Operations and Fire Prevention

In the area of Special Operations in FY 2017, we focused on the Waterfront area of the city in anticipation of the Wharf opening this past October. The Department conducted area familiarization, pre-fire incident planning, and response exercises at the Wharf with land-based Department resources and the Marine Firefighting Unit (MFU). We also have been implementing the recommendations of the BDA Global Report on the Waterfront in order to maximize the Department's readiness in that area.

On January 31, 2018, FEMS accepted delivery of a new Fireboat 2. This vessel replaces the 2006 Metalcraft of similar capabilities. With the addition of the new Fireboat, the Department will have Fireboats 1, 2, and 4 in service.

In the area of Fire Prevention, our focus continues to be on the Fire Prevention Division (FPD) and Operations Division working together more closely and cross-training, so that fire prevention is delivered more seamlessly between the FPD and our company personnel. To that end, in FY 2018, the Department will provide new fire prevention training to all operational personnel. FPD will coordinate with Operations to develop the training and determine the delivery schedule, create the training evaluation process, and report training outcomes.

In FY 2017, the FPD delivered fire safety education at community events, District schools, and 39 senior citizen facilities. In addition, the FPD inspected 75 senior citizen facilities for fire code compliance. We also installed 1,740 smoke alarms – a 46 percent increase over FY 2016.

Organizational Development

Before I turn to EMS, I want to highlight some other progress in organizational development. In FY 2017, the Training Academy launched implementation of our 2016 Leadership Development Plan by developing and hosting two sessions of our new Supervisor I class. It also developed a new Supervisor II curriculum, launched during the first quarter of FY 2018. With these classes, we continue to aggressively play "catch up" to ensure that our officers have certified fire officer training. In 2018, we are hosting additional Supervisor I and Supervisor II classes. We also sent Captains and Battalion Fire Chiefs to the Maryland Fire and Rescue Institute for Fire Officer III training in early calendar year 2018. In addition, our first class of Empowering Women to Lead mentees graduated last fall, and our next class will start this spring.

In the area of capital projects in FY 2017, we were fortunate to open three fully modernized fire stations: Engines 1, 14, and 16. We just hosted a ribbon cutting at our brand new Engine 22 on February 16th. We also made investments and more modest renovations in ten fire houses and at the Training Academy.

This year, we celebrated reaching 50,000 followers on Twitter. Our following has doubled since 2015 and now stands at 53,000. As a Department, we will continue to use social and other media to share the great work our members are doing.

Emergency Medical Services

With regard to Emergency Medical Services (EMS), we continued our focus on improving patient outcomes. On this topic, we recently celebrated some exciting news, which is that our cardiac arrest survival rates have increased for the fourth year in a row. The District is now at or above the national average in five out of seven Utstein categories, tracked by the national Cardiac Arrest Registry to Enhance Survival (CARES) database.

We are seeing more and more cases of cardiac arrest where citizen bystanders are starting CPR before we get there, which is likely contributing to these improved outcomes. Since October 1, 2015, we have trained over 42,000 citizens in CPR. We are putting AEDs in every school in the District. And in October we launched two new initiatives with OUC – Pulse Point and the Atrus AED locator system – which will allow more citizen bystander first responders to know the location of cardiac arrest victims and AEDs. For those watching, we encourage you to sign up for CPR training by visiting our website, and to also download the Pulse Point app on your phone, so you too can learn how to be a Life Saver. We hope these efforts will drive our survival rates up even further.

In FY 2017, we also started to see improvements in our Advanced Life Support (ALS) performance. Last year, we testified that while the AMR contract had improved our Basic Life Support (BLS) transport unit availability, we had not seen the same improvement in ALS or medic unit availability. In March 2017, we converted three BLS units into ALS units. This change resulted in improved medic unit availability in FY 2017, getting closer to our goal of regularly having five or more medic units available 90 percent of the time or more. We also continued to see progress in decreasing the percentage of time that our ALS units spend transporting BLS patients. Last year, we testified that this percentage had reached 18 percent. This year, we are at an average of fifteen percent.

More effective dispatch has also preserved our ALS resources. In FY 2017, the Office of the Medical Director reviewed the Department's ALS and BLS dispatch protocols and revised some call codes from ALS to BLS. Overall, between FY 2017 and FY 2018, there was a shift from a majority of calls being dispatched as ALS in FY 2017 to a majority of calls being dispatched as BLS in FY 2018. We believe that this is a shift towards more accurate dispatch, since approximately 70 percent of our patients are ultimately transported as BLS patients.

But there is yet still more work to do in dispatch. Another significant initiative that will launch in April is a new dispatch system. The OUC is moving from the Priority Dispatch system to

criteria-based dispatch guidelines, or CBD. CBD is recognized as one of the better performing dispatch systems in the country. It has a strong track record of reducing call to dispatch time and matching the right resource to the right call. Ultimately, our goal is to reduce the over-dispatching of resources that happens in our current system, which does not allow for deviation from the system's algorithm.

We have been aggressively recruiting and hiring firefighter paramedics so that we can continue this progress and fully staff our ALS units. While we are facing intense competition with other jurisdictions, and this competition has decreased our flow of paramedic applicants, a class of 18 firefighter paramedics started at the Academy on October 16th and another class will start this month.

And we are focused not just on quantity but on quality. In November, thanks to the support of the Mayor, Council, and our unions, we launched our new Field Training Officer mentoring program for paramedics. Our goal is to give our new paramedics consistent and quality one-on-one mentoring, and to get a good grounding in the demands of EMS in DC before they are released into the field as independent providers.

In the area of EMS training in FY 2017, we continued with our modular training approach, which provides quarterly re-certification sessions instead of biennial 32-hour blocks. FEMS Medical Director Dr. Holman also introduced new company-based EMS training for our BLS providers, and new pediatric and other training for our ALS providers, including the Paramedic Grand Rounds sessions.

We also continued to see improvements in hospital drop times. Last year, I testified that our average drop time had decreased by more than three minutes, from an average of 47 minutes in October to an average of 44 minutes in December. This year, we have reached an average of 41 minutes.

I do want to acknowledge that we continue to have challenges related to our high call volume. The District has the highest per capita EMS call volume in the nation, and our high non-emergency call volume strains the Department's resources for emergencies.

One of our strategies to address this is to reduce the demand for our EMS resources. We are in the final stretch of working with our government and non-governmental partners to launch the *Right Care, Right Now* nurse triage line on April 19, 2018. The goals of this initiative, which represents a new frontier for EMS in the District, are to improve patients' health outcomes and to preserve FEMS resources for those patients with life threatening injuries and illnesses. It should also free up beds in crowded hospital emergency departments, which will benefit all critically ill emergency patients.

After the launch of the program, callers to 911 with non-emergency injuries or illnesses may be transferred to a nurse. The nurse will ask the caller questions and assess his or her symptoms so that the nurse can refer the caller to the most appropriate non-emergency medical care available, most likely a community clinic in the caller's neighborhood. Medicaid and DC Healthcare Alliance enrollees will be provided with free transportation to and from the clinic.

In line with a recommendation from the Office of Contracting and Procurement, the Department is modifying its contract with American Medical Response (AMR) so that AMR will serve as the vendor for the program. AMR is developing the technology infrastructure and providing nurse staffing for the line. We have worked with the District's Medicaid managed care organizations and the Department of Health Care Finance to provide two-way nonemergency medical transportation within an hour for triaged callers who have been referred to an appropriate non-emergency health care site. We have worked closely with our Federally Qualified Health Centers (FQHCs) and urgent care clinics in the District to ensure that there is capacity at each site.

Additionally, we are working with the Lab@DC within the Executive Office of the Mayor to scientifically evaluate the program's intervention for non-emergency callers, as well as effective methods for educating the public about alternative avenues to fast, safe, and effective care.

We have launched a public education campaign around the *Right Care, Right Now* line initiative. We have developed literature, will release public service announcements, and will use other communications strategies to educate the public on the rollout and on the proper use of 911. Starting this week, Department leadership is participating in community meetings across all eight wards of the city to brief residents on the program. We will also initiate aggressive media outreach in the weeks leading up to the launch so we can reach as broad an audience as possible.

Conclusion

Every day, I am reminded that our strongest asset is our employees. In early January, after the frigid cold snap, I sent our members a message praising them for their performance fighting a number of serious blazes in dwellings, commercial buildings, and even on boats in the icy Anacostia River. In addition, they answered hundreds of weather-related calls, such as water leaks, other utility emergencies, and citizens suffering from the effects of the cold, as well as thousands of EMS calls. I told them that throughout this time, they faced the challenge of fire and ice and performed admirably. I meant it. They showed once again the true grit that is the DC Fire and EMS Department. It is a privilege to lead this fine agency.

In closing, I'd like to thank you for your leadership and support. We appreciate the opportunity to share our accomplishments and plans for continuous improvement and look forward to continuing to work with the Committee. This concludes my testimony. My staff and I are happy to address your questions