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



Fire and Emergency Medical Services Department FY 2020 and FY 2021 Performance Oversight Hearing

Testimony of John A. Donnelly, Sr. Fire and EMS Chief

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

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Delivery via Video Conference

Good afternoon Chairperson Allen, Councilmembers and staff. I am John Andrew Donnelly, Sr., Chief of the Fire and Emergency Medical Services Department. I am pleased to testify before you today about the Department's Fiscal Year 2020 and Fiscal Year 2021 performance.

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Most of 2020 and the first half of Fiscal Year 2021 have been an extraordinary time for our Department. To think about what our members have accomplished over the last year is a bit overwhelming.

I recently sent our members a letter commemorating the one-year anniversary of March 11, 2020, the day the World Health Organization declared COVID-19 a pandemic. Five days later, the first of our members tested positive for the coronavirus. To date, 389 of our members have tested positive, 369 of whom have recovered and returned to work. But there isn't one of us who hasn't been impacted. There have been 3,607 instances where our members have been placed in quarantine or isolation, many of them more than once. And many of our members have lost family and friends to the disease.

Each of our members has been on the front lines of the response to the pandemic from the very beginning. We are incredibly fortunate to have Dr. Robert Holman, an infectious disease specialist, as our Medical Director. He knew from day one of the pandemic exactly how the Department needed to prepare and respond. We created new capabilities within the Department, including an Incident Support Team and the Infectious Control Group, or ICG. The ICG was created early in the pandemic, and its members have done an exceptional job working alongside those within the Subject Matter Expert Group to support our infected members, conduct contact tracing, and since December, to manage the vaccination of our members. Our Logistics team has kept us better equipped and protected than most departments across the country. And we have tested thousands of District residents for coronavirus at our firehouses and worked long hours decontaminating apparatus with specialized equipment at our Adams Place, N.E. warehouse.

We did all this and supported each other in life and at work as we continued with our everyday duties, including responding to an average of 510 calls for service a day, numerous First Amendment events, occasional civil disturbances, and several two-alarm and fatal fires.

In January, we looked forward to turning the page on the pandemic, only to be met with the calamities of January 6, when the United States Capitol was overtaken by rioters. Our members calmly and competently waded into a violent and chaotic scene to treat injured police officers and rioters. We typically only enter scenes like that after they are secured by police. But on January 6th, the police were busy protecting the Capitol and our members at times had no choice but to enter hostile scenes to retrieve and treat patients. In short, they risked their lives to save lives.

When talking about the last twelve months, I could end my testimony here and be proud of our accomplishments, and that would be enough. But despite everything, as we got used to the daily demands of the pandemic, we also managed to make progress on many of our key strategic priorities. I will talk about just a few of those now.

In Emergency Medical Services, we continued to innovate, by expanding the use of the *Right Care*, *Right Now* Nurse Triage Line, which turned out to be a critical tool in the early days of the pandemic. As hospitals across the country became overwhelmed with COVID-19 patients, we were able to divert stable

patients from our local emergency departments to self-care, telemedicine, or community clinics. This protected our patients from unnecessary COVID-19 exposure. And while our local hospitals were stretched by the demands of the pandemic, they never became overwhelmed.

Today we regularly divert from nine to ten percent of our daily EMS call volume to the NTL, thanks to our first responders, as well as a reinvigorated partnership with the Office of Unified Communications. Interim Director Cleo Subido is working lockstep with us to improve OUC call taking and dispatching in ways that preserve our resources for our most critical patients and protect the safety of our members. We are very optimistic about the direction of the OUC and look forward to continuing our close partnership with Interim Director Subido and her team.



911 calls sent to Right Care, Right Now Nurse Triage Line

We also continue to focus on improving the quality of patient care and patient outcomes. In September, we trained our paramedics on the use of the most up to date video intubation technology that will help more patients survive cardiac arrest and other life-threatening injuries and illnesses. For our Firefighter EMTs, we revised their EMS mentoring program so our new probationers are better prepared to treat patients on their own and as part of life-saving teams. We will measure our progress in patient care in Fiscal Year 2021 and beyond using the new National EMS Quality Alliance (NEMSQA) measures that will allow us to benchmark our performance against other jurisdictions. And our launch this spring of a new health data exchange with Washington Hospital Center, Georgetown University Hospital, and George Washington University Hospital will inform us of the outcomes of every patient we transport to those facilities, which will represent a sea change in how we evaluate our care and inform our training.

In fiscal year 2021, we have an initiative to improve and expand pre-hospital stroke screening. All suspected stroke patients will be effectively screened to ensure that they are transported to the hospital that can offer the best care for their type of stroke. Most of our stroke patients are from Wards 7 and 8, so this initiative will improve the health outcomes and wellness of residents in those neighborhoods.

In fire suppression, we continue to focus on fireground command discipline and safety. This past fall we launched a new command simulation training that allows our chief officers to practice incident command strategies in real time with participation by company officers and OUC dispatchers. We are currently updating our Standard Operating Guidelines based on the input of chief officers, company officers, and labor. In the area of equipment, after working through some manufacturing delays and other quality assurance issues, our members are now all in possession of and trained in the new 3M Scott 75 5.5 5500 series Self Contained Breathing Apparatus (SCBA). And our apparatus continues to be better maintained and more available than in years past, with engine and ladder truck uptimes on a consistently positive trend.¹



Ambulance Uptime by Quarter



Pumper Uptime by Quarter

¹ Data through FY20 shown. FY21 data will be submitted with the Department's written responses.



In fire prevention, our focus is educating our most vulnerable populations on prevention and fire safety. Tragically, half of our fire fatalities last year were senior citizens. During the first quarter of Fiscal Year 2021, we launched our *What's Cooking, Seniors* initiative that addresses another theme in this year's fires, which frequently involve kitchen accidents. Our Fire Prevention Division (FPD) has not let COVID-19 slow down their educational efforts, with our teams engaging both seniors and elementary school students through virtual platforms. And once a month, during our *All Hands on Prevention* events, we go door to door in neighborhoods across the city, installing smoke detectors and doing fire safety inspections.

The wellness of all our employees continues to be a high priority. Thanks to this Committee, our O2X program has funded a new fitness coordinator who supports our members in the area of fitness, nutrition, and physical therapy. Our Risk Management Division has ongoing initiatives driving safety and cancer prevention. And our peer support counselors have worked around the clock to support our members' mental health needs throughout this extraordinary year. We recently conducted an anonymous employee behavioral health survey that will provide baseline data as we continue our efforts on this critical issue.

I also want to note that the national conversation on race and bias impacts our diverse work force. I believe the best way to engage and educate our workforce on this issue is to talk through it, with the goal of greater understanding, team strengthening, and empowerment. In February, the Department held a Virtual Town Hall Conversation on Race, Ethnicity, and Diversity, the first in what will be an ongoing series of events on the topic. The purpose of the Town Hall was to use Black History Month as a starting point for future discussions by gathering information, thoughts, and opinions of members. Additionally, these town halls will be a tool for our leadership team to assist in the development of action plans that address bias, race, ethnicity, and equity issues within the Department.

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I often wind back to our *Core Values*, or **BASICS** when describing who we are as a Department and individually. Our members' **B**ravery, **A**ccountability, **S**afety, **I**ntegrity, **C**ompassion and **S**ervice are what helped us not only survive the last year but overcome and accomplish so much as an organization. Their dedication and commitment to serve – as well as the dedication and commitment of Mayor Muriel Bowser and of this Council to our Department -- has never wavered. For this and so much more, I say thank you.