



Commission on  
Fire Accreditation  
International

# Annual Compliance Report 09 Edition

**Greensboro Fire Department  
1514 N. Church Street  
Greensboro, NC  
USA 27405**



**This Report Prepared on July 1, 2019  
By  
Dwayne S. Church, Deputy Chief  
For The  
Commission on Fire Accreditation International**

**This Report Represents The Agency's Status  
As It Relates To Its Accreditation Report  
Dated July 1, 2019**

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## Preface

The accreditation report submitted to the Commission on Fire Accreditation International (CFAI) enabled the commission to award accreditation status to your agency. Part of the requirements to retain accredited agency status is your commitment to quality improvement by keeping CFAI informed of any significant changes or developments in activities, direction, or programming. This is accomplished by the preparation and submission of an annual compliance report.

The accreditation report is the internal control document of the commission to record your agencies commitment to the quality improvement process. The annual compliance report is the document used by the Commission to monitor your status as it relates to your standards, procedures and practices as well as the progress made toward addressing strategic and specific recommendations.

Each section must be completed and documentation provided for all changes identified. Examples of appropriate documentation are: certified copy of the governing body minutes, CEO written directives, copies of Federal or State Statutes, copies of local ordinances or resolutions, copies of purchase orders, copies of signed contracts, copies of Federal or State administrative rules, copies of Federal or State regulatory agency ordered action or settlement agreement, copies of court ordered action or settlement agreement, copies of local government charters, or copies of voter approved referendum. Copies of any supporting documentation that was used by the agency to effectuate a change should also accompany the compliance report. Examples of supporting documentation are: feasibility studies, ISO grading reports, position papers, legal opinions, recommendation memos, or consultant's reports.

**Updating Agency Information:** CPSE is tracking much of your agency information and demographics in our database. In order to keep this information current, we request that you **update your agency profile before submitting your ACR.**

The agency head, accreditation manager and department assistant will have multiple identities (personal and agency) and can switch between the two. Login to the portal using your email address.

Click [here](#) to login to the portal.

The annual compliance report is due 45 days before the anniversary date of your agency's most recent award of accreditation.

Any questions regarding the report, its content or length should be directed to the [CFAI Program Director](#).

## Agency Information

Enter the [CPSE portal](#) and update your agency information

Agency Name: Greensboro Fire Department

Agency Address: 1514 N. Church St. Greensboro, NC 27405

Agency Website: gfdnc.com

Agency Head: Chief Bobby Nugent

Agency Head E-Mail: bobby.nugent@greensboro-nc.gov

Agency Head Phone: 336-373-2297

Accreditation Mgr: Dwayne Church

Accred. Mgr. E-Mail: dwayne.church@greensboro-nc.gov

Accred. Mgr. Phone: 336-574-4013

Date of most recent  
Award of Accreditation: 07/27/2017

Annual Compliance  
Report due date: 07/15/2019

Annual Compliance  
Report Number (1-4): 2

Current ISO Rating 1  
If your agency has a split ISO rating please document below:  
ISO:

Current Population: 287,027

Department Type: Career

Number of Fire Stations: 26  
Number of Full Time Personnel: 584  
Number of Part Time (Volunteer/Paid on call) Personnel: 0

ACR Reporting Period: 7/15/2018 to 7/15/2019

## **Agency/Jurisdiction Changes**

1. Has there been a change in key positions of the agency during the past reporting period? Yes
  - a. If yes, please explain and provide an updated organizational chart. Accreditation Manager changed to Assistant Chief Dwayne Church. The previous Accreditation Manger was Deputy Chief Michael Swails.
2. Has there been a change in the governance of the agency? No
  - a. If yes, provide description and any applicable exhibits
3. Has there been a change in the area/population the agency protects? No
  - a. If yes, provide description and exhibits such as census data, maps, etc.
4. Have there been any changes in resources (i.e. equipment, stations, apparatus, etc)? No
  - a. If yes, describe the change and its impact to the community. Provide any exhibits to support your discussion.
5. Have there been any changes in programs/services? No
  - a. If yes, describe the changes and the impact to the community. Provide any exhibits to support your discussion.
6. Describe any significant changes to your annual budget? No changes.

## Accreditation Model Annual Compliance

A. Is your agency in compliance with all core competencies? Yes

If you are not in compliance, identify and explain all core competencies and then provide your plan for improvement during the next year (see example below). Ensure you provide exhibits as necessary. Note that during the phone interview regarding your ACR, the reviewer may have questions regarding these competencies and request additional exhibits.

### **Example:**

1. CC 10B.1: External agency agreements are reviewed on an annual basis and revised as necessary to meet objectives.

Identify and explain:

Plan for improvement:

B. Agencies will provide exhibits for the following core competencies each year:

- a. 2D.6 Performance gaps for the total response area, such as inadequacies, inconsistencies, and negative trends, are determined at least annually.

**Identify and explain:** The Growth Matrix and PowerPivot Charts provide an excellent and visual indicator of performance gaps and improvements. Although the Growth Matrix is updated annually, the PowerPivot files are updated daily and can indicate areas of response performance gaps in near real time. Areas identified with performance gaps are those areas on the distal ends of the city, many where we rely on county contract resources to provide service

**Plan for improvement:** The department will continue to monitor these known gaps and determines ways to overcome the shortcomings. The department will continue to focus on aggressive relocations in fire stations distal to the center of the city as a way to reduce response times.

Please see Exhibit # 1 – Station Matrix & Station Matrix Chart

- b. 3D.1 The agency's goals and objectives are examined and modified at least annually for quality and to ensure they remain current and consistent with the agency's mission, vision, and long range plan(s).

**Identify and explain:** Evaluating and updating on an annual basis by the Department ensures that the agency's Performance Measurement program, CIP, Growth Matrix, and the CFAI SAM process and goals and objectives are in a continuous state of review for effectiveness and quality.

**Plan for improvement:** The Department goals and objectives will continue to be reviewed and evaluated annually by the Executive Team and Command Staff. The Department will update the agency's Strategic Plan with specific, measurable objectives to be accomplished annually.

Please see Exhibit # 2 – Strategic Plans, Goals & Objectives

- c. 5A.5 The agency conducts a formal and documented appraisal, at least annually, to determine the impacts of the community risk reduction program and its efforts in risk reduction based on the community risk assessment, standards of cover, and measures performance against adopted loss reduction goals.

**Identify and explain:** The Department developed a Community Risk Reduction Plan to determine baseline performance interrelated with departmental code enforcement, fire education and community outreach initiatives and actions.

**Plan for improvement:** The Fire Marshal will administer the adoption of a fully integrated Community Risk Reduction Program as well as providing assistance and resources. Working together with the Deputy Chief of the Administrative Division, the program will integrate into established accreditation documents, statistical data and strategic planning.

Please see Exhibit # 3 – Annual Program Appraisal 5A.5

- d. 5B.3 The agency conducts a formal and documented appraisal, at least annually, to determine the impacts of the public education program and its efforts in risk reduction based on community assessment, standards of cover, and measures performance.

**Identify and explain:** The Department has developed a Community Risk Reduction Plan to determine baseline performance interrelated with public fire education and community outreach.

**Plan for improvement:** The Fire & Life Safety Division Public Educator and Public Safety Community Relations Specialist will continue to utilize all departmental data and information systems to conduct formal appraisals directed and identified by the Community Risk Reduction Program.

Please see Exhibit # 4 – Annual Program Appraisal 5B.3

- e. 5C.5 The agency conducts a formal and documented appraisal, at least annually, to determine the impacts of the fire investigation, origin, and cause program and its efforts to reduce fires based on community assessment, standards of cover, and measures performance.

**Identify and explain:** The Department has developed a Community Risk Reduction Plan to determine baseline performance interrelated with public fire education and community outreach.

**Plan for improvement:** The Fire & Life Safety Division Public Educator and Public Safety Community Relations Specialist will continue to utilize all departmental data and information systems to conduct formal appraisals directed and identified by the Community Risk Reduction Program.

Please see Exhibit # 5 – Annual Program Appraisal 5C.5

- f. 5E.3 The agency conducts a formal and documented appraisal, at least annually, to determine the effectiveness of the fire suppression program and its impact on meeting the agency's goals and objectives.

**Identify and explain:** The Training Division JPR assessment program ensures that annually personnel are evaluated as to job tasks performance capabilities and the PIA process has been utilized to reinforce departmental procedures, successful actions taken, and to identify ways to improve the effectiveness and efficiency of the fire suppression program.

**Plan for improvement:** The Battalion Chief of Line Company Training will continue to provide training on JPR's to ensure a task performance measurement; and it shall be the responsibility of Emergency Services Company Officers, Battalion Chiefs, Commanders, and the Deputy Chief to ensure quality company level training to help determine effectiveness of the fire suppression program.

Please see Exhibit # 6 – Annual Program Appraisal 5E.3

- g. 5F.7 The agency conducts a formal and documented appraisal, at least annually, to determine the effectiveness of the EMS program and its impact on meeting the agency's goals and objectives. This should include an evaluation of the agency's standard operating procedures, protocols, and equipment.

**Identify and explain:** From July 1, 2017 – May 31, 2018, the GFD documented 14,916 patient care reports. Of those reports, the QI/QA committee reviewed 59 EMS incidents utilizing the AED, 58 incidents in which medications were administered and 302 incidents with BLS service.

**Plan for improvement:** The committee will soon develop a form letter which will be provided to fire companies who have had a report reviewed by the QI/QA committee. This form letter will provide feedback, positive and negative, based on the committee's review of the incident. Furthermore, the committee will attempt to increase the number of incidents reviewed and incorporate GCEMS and the county medical directors into the program for additional oversight. QI/QA reviews will continually be used to strengthen the EMT CE program and ultimately the quality of care rendered by GFD EMT personnel. Annual appraisal reports will also be used for charting the direction of the EMS program and related training.

Please see Exhibit # 7 – Annual Program Appraisal 5F.7

- h. 5G.3 The agency conducts a formal and documented appraisal, at least annually, to determine the effectiveness of the technical rescue program and its impact on meeting the agency's goals and objectives. This appraisal must include a full-scale evaluation of the response components, including mutual aid, when part of the deployment model.

**Identify and explain:** Annually Analysis of team drills, training sessions, and actual incidents need to be added to the TRT Quarterly meetings in order to provide a more accurate assessment. In 2017, the Special Operations Division produced a “Special Operations PIA” for tracking all Special Operations deployments and training events.

**Plan for improvement:** TRT Captains will continue to monitor the efficiency in team operations by effective communication and cooperation between all shifts on a daily basis. The Special Operations Division TRT Battalion Chief will meet annually with TRT team members and provide a forum for team members to contribute ideas and resolve challenges identified by periodic self-assessments

Please see Exhibit # 8 – Annual Program Appraisal 5G.3

- i. 5H.3 The agency conducts a formal and documented appraisal, at least annually, to determine the effectiveness of the hazardous materials program and its impact on meeting the agency's goals and objectives. This appraisal must include a comprehensive evaluation of the response components, including mutual aid, when part of the deployment model.

**Identify and explain:** The annual meetings have been effective evaluating the complete program, including response effectiveness, incident pros and cons, safety, accountability and overall incident effectiveness. In 2017, the Special Operations Division produced a “Special Operations PIA” for tracking all Special Operations deployments and training events.

**Plan for improvement:** The Special Operations Assistant Chief and HMP Battalion Chief will ensure team effectiveness by having the Hazmat Officers report their individual hazmat activities, review response data and overall hazmat incident effectiveness.

Please see Exhibit # 9 – Annual Program Appraisal 5H.3

- j. 5I.2 The agency conducts a formal and documented appraisal, at least annually, that includes an analysis of response procedures, equipment, training, and after action reports to determine the effectiveness of the aviation rescue and firefighting services program and meeting the agency's goals and objectives.

**Identify and explain:** The Training Division JPR assessment program ensures that annually personnel are evaluated as to job tasks performance capabilities and the PIA process has been utilized to reinforce Departmental procedures, successful actions taken, and to identify ways to improve the effectiveness and efficiency of the fire suppression program.

**Plan for improvement:** The Assistant Chief of Special Operations will continue to be responsible to ensure, appraisals for the ARFF program are conducted at least annually, and personnel are trained for response to these types of events

Please see Exhibit # 10 – Annual Program Appraisal 5I.2

- k. 9B.10 A formal and documented appraisal is conducted, at least annually, to determine the effectiveness of the emergency communications system and its impact of meeting the agency's goals and objectives.

**Identify and explain:** Today, GM911 is holding 02:30 when evaluating all events, monthly at the 90th percentile. Fire events are better, hovering the 01:10 range. In the past two years, improvements on medical call processing have been made due to the fast-forwarding of 12 life threatening nature codes, prior to EMD questions.

**Plan for improvement:** Each month the call processing times are verified and evaluated. Any calls not in compliance within standard objectives are subjected to GM911 review and potential remediation.

- C. Have there been any changes in compliance to non-core competencies? No

Please identify and explain all changes in non-core competencies and provide your plan for improvement (if needed) during the next year (see example below). Ensure you provide exhibits as necessary. Note that during the phone interview regarding your ACR the reviewer may have questions regarding these competencies and request additional exhibits.

## Performance Monitoring

Are you currently meeting the following performance indicators? Yes

If yes, please provide the exhibit. If no, describe your plan for doing so in the future.

2D.8 On at least an annual basis, the agency formally notifies the authority having jurisdiction (AHJ) of any gaps in the operational capabilities and capacity of its current delivery system to mitigate the identified risks within its service area, as identified in its standards of cover.

**Identify and explain:** The department, and the city manager's office, are currently in development with Gate City Stats to focus on performance metrics. We are starting the process by using Response Times for Medical and Response Times for Fire related incidents, Fires confined to the room of origin and the Arrival of an Effective Response Force.

**Plan for improvement:** The department, by direction from the city manager's office, will be migrating to Gate City Stats, an open data portal by Socrata. This will replace the MAP program from the years past. Over the next several months, the Planning Division will work directly with our budget analysis to focus the measures used in this process to allow the up-to-date monitoring of the department's performance and achievements toward the goals.

2D.9 On at least an annual basis, the agency formally notifies the AHJ of any gaps between current capabilities, capacity, and the level of service approved by the AHJ.

**Identify and explain:** The Station Matrix has proven to be a valuable planning tool to compare, evaluate and forecast FSA level of service, performance, capabilities, capacity and resilience. The last 5 new fire stations, plus one under construction, were planned in advance with the Station Matrix tool forecasting when and where the fire station were needed

**Plan for improvement:** The department's Planning Division will continue to update the Station Matrix annually and evaluate the level of service, performance, capabilities, capacity and resilience of every FSA, watching trends both positive and negative, to assist in determining future needs.

2D.10 The agency interacts with external stakeholders and the AHJ at least once every three years, to determine the stakeholders' and AHJ's expectations for types and levels of services provided by the agency.

**Identify and explain:** The change from the MAP program to Gate City Stats is an improvement as it relates to the measure and monitoring performance. The change is underway at this time but allows city performance measure to be more in line with the department's measure as they relate to Accreditation and industry best practices, will be updated monthly and forward facing to the public (external stakeholder).

**Plan for improvement:** The Department's Planning Division will continue to work on the implementation of Gate City Stats, giving city council and the external stakeholder assess to updated monthly performance measures which are tied to expectations and goals established in annual meetings with the city manager's office and periodic meeting with the external stakeholder.

## Agency Performance Tracking

(High/Target) Fire Suppression - 90th Percentile Times - Baseline Performance			Agency Target	Agency Baseline	17-18	16-17	15-16	14-15	13-14
Alarm Handling	Pick-up to Dispatch	Urban	01:00	01:29	01:08	01:08	01:03	01:14	01:52
Turnout Time	Turnout Time 1st Unit	Urban	01:20	01:59	02:02	02:09	02:01	01:59	01:39
Travel Time	Travel Time 1st Unit Distribution	Urban	03:00	03:31	03:31	03:17	03:12	03:36	03:30
	Travel Time ERF Concentration	Urban	07:00	07:03	06:44	06:49	06:28	07:26	06:55
Total Response Time	Total Response Time 1st Unit on Scene Distribution	Urban	05:20	05:51	05:51	05:46	05:36	05:39	05:54
			---	325	99	99	128	127	183
	Total Response Time ERF Concentration	Urban	09:20	09:48	08:59	09:47	09:14	09:57	10:22
			---	636	56	49	82	31	69

### Benchmark Objective (Target)

For 90% percent of all special/high fire responses, the total response time for the arrival of the first-due unit, staffed with a minimum of **4 firefighters**, shall be **5 minutes and 20 seconds**. The first arriving unit shall be capable of establishing command, size up, establishing water supply, initiating fire attack and/or rescue, and utilizing safe operational procedures.

For 90% of all special/high risk fires, an **ERF of 24 personnel** shall arrive within **9 minutes**. The ERF shall be capable of establishing command; providing an uninterrupted water supply; advancing an attack line and a backup line for fire control; complying with the OSHA requirements of two in-two out; completing forcible entry; searching and rescuing at-risk victims; evacuation; ventilating the structure; exposure protection; controlling utilities; and performing salvage and overhaul; and placing master and elevated streams into service from aerial ladders. These operations shall be done in accordance with Departmental standard operating procedures while providing for the safety of responders and the public.

### **Baseline Objective**

For 90% percent of all special/high fire responses, the total response time for the arrival of the first-due unit, staffed with a minimum of **4 firefighters**, shall be **5 minutes and 51 seconds**. The first arriving unit shall be capable of establishing command, size up, establishing water supply, initiating fire attack and/or rescue, and utilizing safe operational procedures.

For 90% of all special/high risk fires, an ERF of a minimum of **20 personnel** shall arrive within **09 minutes 48 seconds**. The ERF shall be capable of establishing command; providing an uninterrupted water supply; advancing an attack line and a backup line for fire control; complying with the OSHA requirements of two in-two out; completing forcible entry; searching and rescuing at-risk victims; evacuation; ventilating the structure; exposure protection; controlling utilities; and performing salvage and overhaul; and placing master and elevated streams into service from aerial ladders. These operations shall be one in accordance with Departmental standard operating procedures while providing for the safety of responders and the general public.

<b>(Moderate) Fire Suppression - 90th Percentile Times - Baseline Performance</b>			<b>Agency Target</b>	<b>Agency Baseline</b>	<b>17-18</b>	<b>16-17</b>	<b>15-16</b>	<b>14-15</b>	<b>13-14</b>
<b>Alarm Handling</b>	Pick-up to Dispatch	Urban	01:00	01:25	01:09	01:11	01:06	01:12	01:59
<b>Turnout Time</b>	Turnout Time 1st Unit	Urban	01:20	01:58	01:59	02:03	02:05	01:50	01:33
<b>Travel Time</b>	Travel Time 1st Unit Distribution	Urban	03:30	03:41	03:40	03:37	03:39	03:41	03:48
	Travel Time ERF Concentration	Urban	07:00	06:55	06:29	06:25	06:58	07:00	07:25
<b>Total Response Time</b>	Total Response Time 1st Unit on Scene Distribution	Urban	05:40	06:09	06:08	06:04	06:00	06:00	06:21
			---	3,987	740	802	808	773	864
	Total Response Time ERF Concentration	Urban	09:20	09:42	09:20	09:16	09:50	09:51	10:12
			---	1,957	378	420	397	352	410

**Benchmark Objective (Target)**

For 90% percent of all moderate fire responses, the total response time for the arrival of the first-due unit, staffed with a minimum of **4 firefighters**, shall be **5 minutes and 40 seconds**. The first arriving unit shall be capable of establishing command, size up, establishing water supply, initiating fire attack and/or rescue, and utilizing safe operational procedures.

For 90% of all moderate fire responses, an ERF of a minimum of **21 personnel** shall arrive within **10 minutes 20 seconds** total response time. The ERF for moderate risk shall be capable of establishing command; providing an uninterrupted water supply; advancing an attack line and a backup line for fire control; complying with the OSHA requirements of two in-two out; completing forcible entry; searching and rescuing at-risk victims; evacuation; ventilating the structure; exposure protection; controlling utilities; and performing salvage and overhaul.

### **Baseline Objective**

For 90% percent of all moderate fire responses, the total response time for the arrival of the first-due unit, staffed with a minimum of **4 firefighters**, shall be **6 minutes and 9 seconds**. The first arriving unit shall be capable of establishing command, size up, establishing water supply, initiating fire attack and/or rescue, and utilizing safe operational procedures.

For 90% of all moderate fire responses, an ERF of a minimum of **17 personnel** shall arrive within **09 minutes 42 seconds** total response time. The ERF for moderate risk shall be capable of establishing command; providing an uninterrupted water supply; advancing an attack line and a backup line for fire control; complying with the OSHA requirements of two in-two out; completing forcible entry; searching and rescuing at-risk victims; evacuation; ventilating the structure; exposure protection; controlling utilities; and performing salvage and overhaul.

<b>(Low) Fire Suppression - 90th Percentile Times - Baseline Performance</b>			<b>Agency Target</b>	<b>Agency Baseline</b>	<b>17-18</b>	<b>16-17</b>	<b>15-16</b>	<b>14-15</b>	<b>13-14</b>
<b>Alarm Handling</b>	Pick-up to Dispatch	Urban	01:00	01:19	01:08	01:11	01:09	01:13	01:46
<b>Turnout Time</b>	Turnout Time 1st Unit	Urban	01:20	01:57	02:02	02:06	02:00	01:46	01:27
<b>Travel Time</b>	Travel Time 1st Unit Distribution	Urban	04:00	04:09	04:17	04:04	04:18	04:07	04:07
<b>Total Response Time</b>	Total Response Time 1st Unit on Scene Distribution	Urban	06:20	06:32	06:46	06:35	06:47	06:08	06:23
			---	2,611	498	584	515	501	513

**Benchmark Objective (Target)**

For 90% percent of all low fire responses, the total response time shall be **6 minutes and 20 seconds**. The first arriving unit shall be staffed with a minimum of **4 firefighters**, capable of establishing command, size up, establishing water supply, initiating fire attack and/or rescue, and utilizing safe operational procedures.

**Baseline Objective**

For 90% percent of all low fire responses, the total response time shall be **6 minutes and 32 seconds**. The first arriving unit shall be staffed with a minimum of **4 firefighters**, capable of establishing command, size up, establishing water supply, initiating fire attack and/or rescue, and utilizing safe operational procedures.

HazMat Risk Response - 90th Percentile Times - Baseline Performance			Agency Target	Agency Baseline	17-18	16-17	15-16	14-15	13-14
Alarm Handling	Pick-up to Dispatch	Urban	01:30	01:34	01:12	01:11	01:12	01:23	02:13
Turnout Time	Turnout Time 1st Unit	Urban	01:20	02:11	02:17	02:18	02:17	02:05	01:35
Travel Time	Travel Time 1st Unit Distribution	Urban	03:45	04:00	04:03	03:52	04:00	04:12	03:58
	Travel Time ERF Concentration	Urban	11:20	12:32	12:53	11:19	11:04	13:20	12:55
Total Response Time	Total Response Time 1st Unit on Scene Distribution	Urban	06:35	06:43	06:44	06:27	06:41	06:27	06:48
			---	1,482	297	293	331	269	292
	Total Response Time ERF Concentration	Urban	14:10	16:59	17:58	16:40	16:11	16:45	16:50
			---	807	142	141	182	158	184

**Benchmark Objective (Target)**

For 90% of all hazardous materials incidents, the first-in apparatus shall arrive within **6 minutes 35 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighters** capable of establishing command, size up, assessing the situation to determine the presence of a potential hazardous material/explosive device; determine the need for additional resources, estimate the potential harm without intervention, and begin establishing a hot, warm, and cold zone.

For 90% of all hazardous materials incidents, the **ERF of 9 personnel** shall arrive within **14 minutes 10 seconds**. The ERF shall be capable of providing the equipment, technical expertise, knowledge, skills and abilities in order to mitigate a hazardous materials incident.

### **Baseline Objective**

For 90% of all hazardous materials incidents, the first-in apparatus shall arrive within **6 minutes 43 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighters** capable of establishing command, size up, assessing the situation to determine the presence of a potential hazardous material/explosive device; determine the need for additional resources, estimate the potential harm without intervention, and begin establishing a hot, warm, and cold zone.

For 90% of all hazardous materials incidents, the **ERF of 7 personnel** shall arrive within **16 minutes 59 seconds**. The ERF shall be capable of providing the equipment, technical expertise, knowledge, skills and abilities in order to mitigate a hazardous materials incident.

Technical Rescue - 90th Percentile Times - Baseline Performance			Agency Target	Agency Baseline	17-18	16-17	15-16	14-15	13-14
Alarm Handling	Pick-up to Dispatch	Urban	01:30	02:57	01:55	02:32	02:17	02:29	03:06
Turnout Time	Turnout Time 1st Unit	Urban	01:20	01:54	02:04	01:48	02:09	01:43	01:21
Travel Time	Travel Time 1st Unit Distribution	Urban	03:40	03:50	04:03	02:50	03:39	03:40	03:46
	Travel Time ERF Concentration	Urban	07:20	08:58	08:18	07:44	07:18	08:40	09:51
Total Response Time	Total Response Time 1st Unit on Scene Distribution	Urban	06:30	07:26	07:40	06:39	07:02	07:25	06:56
			---	295	36	43	56	68	92
	Total Response Time ERF Concentration	Urban	10:10	12:26	12:22	10:54	10:58	11:55	12:52
			---	92	10	11	11	27	33

### **Benchmark Objective (Target)**

For 90% of all technical rescue incidents, the first-in apparatus shall arrive within **6 minutes 20 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighters** and capable of establishing command, size up to determine if a technical rescue response is required, request additional resources, control the hazards, and provide basic life support to any victim without endangering personnel. For 90% of all technical rescue incidents, the ERF of **12 personnel** shall arrive within **10 minutes 10 seconds** total response time. The TRT shall be capable of establishing patient contact, staging and apparatus set up, providing technical expertise, knowledge, skills and abilities during technical rescue incidents, and providing first responder medical support.

### **Baseline Objective**

For 90% of all technical rescue incidents, the first-in apparatus shall arrive within **7 minutes 26 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighters** and capable of establishing command, size up to determine if a technical rescue response is required, request additional resources, control the hazards, and provide basic life support to any victim without endangering personnel. For 90% of all technical rescue incidents, the ERF of **10 personnel** shall arrive within **12 minutes 26 seconds** total response time. The ERF shall be capable of establishing patient contact, staging and apparatus set up, providing technical expertise, knowledge, skills and abilities during technical rescue incidents, and providing first responder medical support.

All Medical Hazard - 90th Percentile Times - Baseline Performance			Agency Target	Agency Baseline	17-18	16-17	15-16	14-15	13-14
Alarm Handling	Pick-up to Dispatch	Urban	01:30	02:48	02:39	02:41	02:37	02:47	03:11
Turnout Time	Turnout Time 1st Unit	Urban	01:00	02:01	02:07	02:08	02:08	01:46	01:29
Travel Time	Travel Time 1st Unit Distribution	Urban	03:50	03:59	04:00	03:55	03:56	03:59	04:04
Total Response Time	Total Response Time 1st Unit on Scene Distribution	Urban	06:20	07:31	07:31	07:31	07:30	07:23	07:38
			---	117,539	24,879	25,026	24,060	21,939	21,615

**Benchmark Objective (Target)**

For 90% of all medical aid incidents, a first-in apparatus shall arrive within **6 minutes 20 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighter/EMTs** and be capable of providing basic life support with Automatic External Defibrillator (AED) capability until the EMS unit arrives on the scene. If the EMS unit arrives first, EMS will begin medical assistance and upon arrival, the company will provide support, if required.

**Baseline Objective**

For 90% of all medical aid incidents, a first-in apparatus shall arrive within **7 minutes 31 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighter/EMTs** and be capable of providing basic life support with AED capability, until the EMS unit arrives on the scene. If the EMS unit arrives first, EMS will begin medical assistance and upon arrival, the company will provide support, if required.

Low Medical Hazard - 90th Percentile Times - Baseline Performance			Agency Target	Agency Baseline	17-18	16-17	15-16	14-15	13-14
Alarm Handling	Pick-up to Dispatch	Urban	01:30	03:07	03:09	03:10	03:01	02:57	03:19
Turnout Time	Turnout Time 1st Unit	Urban	01:00	02:03	02:08	02:11	02:11	01:48	01:30
Travel Time	Travel Time 1st Unit Distribution	Urban	03:50	04:01	04:03	04:00	03:58	03:59	04:04
Total Response Time	Total Response Time 1st Unit on Scene Distribution	Urban	06:20	07:55	08:10	08:07	07:56	07:30	07:43
			---	51,211	10,704	10,681	10,302	9,715	9,809

**Benchmark Objective (Target)**

For 90% of all low priority medical aid incidents, a first-in apparatus shall arrive within **6 minutes 20 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighter/EMTs** and be capable of providing basic life support with Automatic External Defibrillator (AED) capability until the EMS unit arrives on the scene. If the EMS unit arrives first, EMS will begin medical assistance and upon arrival, the company will provide support, if required.

**Baseline Objective**

For 90% of all low priority medical aid incidents, a first-in apparatus shall arrive within **7 minutes 55 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighter/EMTs** and be capable of providing basic life support with AED capability, until the EMS unit arrives on the scene. If the EMS unit arrives first, EMS will begin medical assistance and upon arrival, the company will provide support, if required.

Moderate Medical Hazard (fast-forwarded events) - 90th Percentile Times - Baseline Performance			Agency Target	Agency Baseline	17-18	16-17	15-16	14-15	13-14
Alarm Handling	Pick-up to Dispatch	Urban	01:30	02:29	01:46	01:57	02:13	02:41	03:06
Turnout Time	Turnout Time 1st Unit	Urban	01:00	01:59	02:06	02:05	02:06	01:44	01:29
Travel Time	Travel Time 1st Unit Distribution	Urban	03:50	04:01	04:04	03:58	03:59	04:00	04:05
Total Response Time	Total Response Time 1st Unit on Scene Distribution	Urban	06:20	07:12	06:56	06:57	07:12	07:20	07:34
			---	69,377	15,038	15,037	14,309	12,707	12,286

### **Benchmark Objective (Target)**

For 90% of all moderate priority medical aid incidents, a first-in apparatus shall arrive within **6 minutes 20 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighter/EMTs** and be capable of providing basic life support with Automatic External Defibrillator (AED) capability until the EMS unit arrives on the scene. If the EMS unit arrives first, EMS will begin medical assistance and upon arrival, the company will provide support, if required.

### **Baseline Objective**

For 90% of all moderate priority medical aid incidents, a first-in apparatus shall arrive within **7 minutes 12 seconds** total response time. The first-in unit shall be staffed with a minimum of **4 firefighter/EMTs** and be capable of providing basic life support with AED capability, until the EMS unit arrives on the scene. If the EMS unit arrives first, EMS will begin medical assistance and upon arrival, the company will provide support, if required.

## Strategic Recommendations

Recommendation	ACCEPTED	IMPLEMENTED	REJECTED
<p><u>2C.5 The agency has identified the total response time components for delivery of services in each service program area and found those services consistent and reliable within the entire response area.</u></p> <p>It is recommended that the department continue to work with the Guilford Metro 911 Communications Center to identify and act on opportunities to improve call-processing times.</p>	<p>ACR 2018: Currently have two members of the GFD who are part of the Fire Users Group that meets with Guilford Metro 911 on a monthly basis to discuss call-processing times.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Call processing times".</p> <p><b>ACR 2019:</b> GFD has increased the number of members on the Fire Users Group to three. This gives the GFD more voting power and influence as part of the monthly meetings and direction of Guilford-Metro 911. It remains a priority of the group to address call processing times at each monthly meeting. See Exhibit "Call processing times".</p>	
<p><u>3C.1 Some form of organizational management process is identified and used to track progress and results of agency goals and objectives relating to general organizational and</u></p>	<p>ACR 2018: An annual review of all goals and objectives within the Strategic plan has been scheduled through Power DMS.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Strategic Plan Goals &amp; Objectives".</p> <p><b>ACR 2019:</b> All goals and objectives were reviewed by the Executive Staff through</p>	

<p><u>operational programs.</u></p> <p>It is recommended the department further formalize the process for tracking the progress and results in accomplishing the approved goals and objectives found in the strategic plan.</p>		<p>Power DMS. A revision of the Strategic Plan is underway and surveys have been created for external feedback. See Exhibit "Strategic Plan Goals &amp; Objectives".</p>	
<p><u>5A.3 The program has sufficient staff with specific expertise to meet the community risk reduction program goals, objectives, and identified community risks.</u></p> <p>It is recommended that the department continue its pursuit of filling open positions in the life safety division and conduct a workforce analysis to determine the effectiveness of current staffing levels.</p>	<p>ACR 2018: Fire Marshal is currently looking at job descriptions and performing a job analysis of all positions in the Fire &amp; Life Safety Division. The plan will be conveyed to the Fire Chief during the 2018/2019 fiscal year with identified number of additional staff needed.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Future &amp; Current Fire &amp; Life Safety Org Chart".  <b>ACR 2019:</b> The plan for staffing positions in the Fire &amp; Life Safety Division is underway. A Plans Review inspector was hired and staffing for Plans Review has increased from 1 person to 5 personnel because of workload. The plan has been presented to the City of Greensboro Finance Department who will assist in creating new positions for inspectors. 2 new employees in the Public</p>	

		Education Unit and refilled a Deputy Fire Marshal position over inspections. See Exhibit "Future & Current Fire & Life Safety Org Chart".	
<p><u>5A.5 The agency conducts a formal documented appraisal, at least annually, to determine the impacts of the community risk reduction program and its efforts in risk reduction based on community risk assessment, standards of cover, and measures performance against adopted loss reduction goals.</u></p> <p>It is recommended that the department continue to utilize data for identification of community risks in order to establish a comprehensive evaluation process that will be conducted at least annually to assess the effectiveness of the Community Risk Reduction program.</p>	<p>ACR 2018: The Planning Division &amp; EMT Coordinator has assisted Fire &amp; Life Safety to indicate where education is needed and what subject matter needs to be addressed. The CRR Plan will be reviewed on an annual basis by the Fire Marshal.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "CRR and Education Meeting".</p> <p><b>ACR 2019:</b> The CRR plan is currently under review. The Fire &amp; Life Safety Division is going to meet with the Emergency Services Division by the end of 2019 to collectively formulate the CRR Plan.</p>	

<p><u>5B.2 The agency conducts a formal documented appraisal, at least annually, to determine the impacts of the community risk reduction program and its efforts in risk reduction based on community risk assessment, standards of cover, and measures performance against adopted loss reduction goals.</u></p> <p>It is recommended that the department assess the performance goals of the program against actual performance to ensure adequate human resources are assigned to manage identified gaps in service to the community.</p>	<p>ACR 2018: A Public Fire Educator was hired on July 1, 2018.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Fire Educator Job Description".</p> <p><b>ACR 2019:</b> Annual performance appraisal conducted on 6/19/19 to the Leadership Team. 100% of all 5<sup>th</sup> grade classes in Guilford County reached in 2018. Elderly population is being targeted by request only at this point. The goal is to be more proactive with this group. See Exhibit "5<sup>th</sup> Grade Elementary Fire Education"</p>	
<p><u>5C.3 The program has sufficient staff with specific expertise to meet the fire investigation, origin, and cause program goals, objectives, and identified community risks.</u></p> <p>It is recommended that an evaluation of the staffing and workload of the program be conducted to ensure the program</p>	<p>ACR 2018: Fire Marshal is currently looking at job descriptions and performing a job analysis of all positions in the Fire &amp; Life Safety Division. The plan will be conveyed to the Fire Chief during the 2018/2019 fiscal year</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Future &amp; Current Fire &amp; Life Safety Org Chart".</p> <p><b>ACR 2019:</b> Fire Marshal has had numerous meetings with the COG Finance Department to discuss</p>	

<p>performance objectives are met annually.</p>	<p>with identified number of additional staff needed.</p>	<p>revenue from inspection fees and how this revenue will fund additional inspectors. The plan is to add four inspectors by the 2020/2021 budget year. See Exhibit "Future &amp; Current Fire &amp; Life Safety Org Chart".</p>	
<p><u>5C.5 The agency conducts a formal and documented appraisal, at least annually, to determine the impacts of the fire investigation, origin, and cause program and its efforts to reduce fires based on community assessment, standards of cover, and measures performance.</u></p> <p>It is recommended the program staff establish a link with the police department to track the progress and outcome of referred incidents to better quantify the outcomes of the investigation program.</p> <p>It is further recommended the program establish a process that ensures open investigations are tracked weekly or monthly to ensure they are appropriately closed out in the RMS or promptly referred for</p>	<p>ACR 2018: Evaluation of the past program model to determine the effectiveness of having a full time Greensboro Police Officer on staff to assist with fire investigations. The Fire &amp; Life Safety Division is currently using data analysis to ensure investigations are appropriately and promptly completed.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Incendiary Label".</p> <p><b>ACR 2019:</b> All investigations are tracked on a daily basis. The information is placed in a local folder that has limited access but is monitored by the Executive Staff, Fire Marshal, and Deputy Fire Marshal. Quarterly meetings are scheduled with the Greensboro Police Department. This meeting is to discuss all arson cases and this has developed interagency cooperation. See Exhibit "Incendiary Label".</p>	

<p>further work by the police department.</p>			
<p><u>5F.1 Given its standards of cover and emergency deployment objectives, the agency meets its staffing, response time, station(s), apparatus, and equipment deployment objectives for each type and magnitude of emergency medical incident(s).</u></p> <p>It is recommended an assessment of the total response time for Guilford County EMS and Greensboro Fire to "fast forward" incidents be assessed at the 90<sup>th</sup> percentile level on a monthly basis.</p>	<p>ACR 2018: We have started measuring and comparing all 12 fast forwarded nature codes separate from the non-fast forwarded events. This is being evaluated in real time once a fast forwarded call is dispatched.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See "Fast Forwarding vs. Non-Fast Forwarding Med Calls "  <b>ACR 2019:</b> The GFD is tracking all fast forwarded EMS calls on a daily basis using the ESIMS software. These fast forwarded incidents are deemed "Moderate Medical" in the SOC results. See "Fast Forwarding vs. Non-Fast Forwarding Med Calls "</p>	
<p><u>5F.5 The agency has a Health Insurance Portability and Accountability Act (HIPAA) or equivalent (e.g., Freedom of Information and Protection of Privacy [FOIP] for Canada) compliance program in place for the EMS program that meets federal and state/provincial guidelines, and all personnel are properly trained in HIPAA/FOIP regulations and procedures.</u></p>	<p>ACR 2018: a HIPPA policy has been added to the department's General Operating Guidelines.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Protected Health Information".  <b>ACR 2019:</b> The HIPPA policy has been reviewed and remains in the GFD GOG's. See Exhibit "Protected Health Information".</p>	

<p>It is recommended the department develop a guideline that memorializes the protection of patient information and the conditions under which it will be released.</p>			
<p><u>5F.7 The agency conducts a formal and documented appraisal, at least annually, to determine the effectiveness of the EMS program and its impact on meeting the agency's goals and objectives. This includes an evaluation of the agency's standard operating procedures, protocols, and equipment.</u></p> <p>It is recommended the department develop a process for the regular, scheduled review of a designated percentage of submitted reports to ensure completion and compliance with department expectations.</p> <p><u>7B.6 A supervised probationary process is used to evaluate new and promoted members based on the candidates'</u></p>	<p>ACR 2018: An Audit and Review Committee meets on a quarterly basis and they are currently reviewing GFD medical calls.</p> <p>ACR 2018: An evaluation for all newly promoted members that is currently being completed by their direct supervisor on a quarterly basis.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "May &amp; June Meeting Minutes and Agenda".</p> <p><b>ACR 2019:</b> The Audit &amp; Review Committee is meeting quarterly to review all medical calls when the defibrillator is used and a percentage of all other medical incidents. See Exhibit "EMS QIQA Meeting Minutes"</p>	

<p><u>demonstrated knowledge, skills, and abilities.</u></p> <p>It is recommended the department develop, document, and implement a formal evaluation process for newly promoted members during the probationary process that ensures the proper Knowledge, Skills and Abilities (KSAs) needed to fulfill their new role are met.</p>		<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Company Officer Dev Support"</p> <p><b>ACR 2019:</b> A new evaluation sheet is being utilized to track the progress of newly promoted members during their probationary period. See Exhibit "Company Officer Dev Support"</p>	
<p><u>7C.1 Personnel policies, procedures, and rules are current, written, and communicated to all personnel.</u></p> <p>It is recommended that the department works with the Greensboro Human Resources Department to establish a system to more thoroughly track and document the review of policies not under the control of the Fire Department to ensure they are current and effective for the</p>	<p>ACR 2018: City of Greensboro Human Resources are currently updating all policies on an annual basis.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Policy Reviews".</p> <p><b>ACR 2019:</b> The Human Resources representative for the Greensboro Fire Department serves on the committee to annually review all City of Greensboro policies. All GOG's and fire department policies are</p>	

<p>organization and the department (This recommendation also applies to the following program area: 7A.1).</p>		<p>updated annually through Power DMS. See Exhibit "Policy Reviews".</p>	
<p><u>7F.1 A specific person or persons are assigned responsibility for implementing the occupational health, safety, and risk management programs.</u></p> <p>It is recommended that the department develop a plan that ensures all company officers and acting company officers receive training to serve in the role of Incident Safety Officers.</p>	<p>ACR 2018: A Safety Officer class was presented to all GFD Company Officers by the Safety Officer.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Safety Officer Training Roster".</p> <p><b>ACR 2019:</b> Incident Safety Officer training was presented in 2018 and 2019 to current Lieutenants and Company Officers in Officer Candidate School (OCS) and the Chief Officer Leadership Academy (COLA). See Exhibit "COLA Roster"</p>	
<p><u>7F.6 The agency uses near miss reporting to elevate the level of situational awareness in an effort to teach and share lessons learned from events that, except for a fortunate break in the chain of events, could have resulted in a</u></p>	<p>ACR 2018: A GOG (8.22) has been developed and distributed to all GFD personnel utilizing Power DMS. This GOG is a non-punitive policy that encourages all personnel to utilize the Near Miss Program.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Near Miss Policy".</p> <p><b>ACR 2019:</b> The Near Miss Program is discussed in Company Officer Training which is communicated to individual companies</p>	

<p><u>fatality, injury, or property damage.</u></p> <p>It is recommended that the department develop a non-punitive policy that encourages personnel to report near misses occurring while on duty to the Near Miss Reporting System.</p>		<p>through the Company Officers. This is also discussed in Officer Candidate School and Chief Officer Leadership Academy. See Exhibit "Near Miss Policy".</p>	
<p><u>7G.5 A formal documented appraisal is conducted at least annually, to determine the effectiveness of the wellness/fitness programs and its impact on meeting the agency's goals and objectives.</u></p> <p>It is recommended that the department develop a formal appraisal system in order to identify trends in the health of firefighting personnel to gauge the effectiveness of the program annually and identify health risks that could impact personnel.</p>	<p>ACR 2018: The GFD annual medical physicals, annual physical fitness assessments, mental health and peer support team intervention, fitness committee objectives, and the city wellness program will be constantly reviewed and evaluated to gauge the effectiveness of the program and to identify health risks that could impact personnel.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "AFAT Data Results".  <b>ACR 2019:</b> A formal appraisal was conducted with the presentation of wellness/fitness activities in the GFD to the Leadership Team in June 2019. This presentation included information about annual firefighter physicals and the annual fitness evaluation for every GFD firefighter. See Exhibit "AFAT Data Results".</p>	
<p><u>8A.2 The agency's training program is consistent with</u></p>	<p>ACR 2018: Training with contract,</p>	<p><b>ACR 2018:</b> Was implemented on August</p>	

<p><u>the mission statement, goals and objectives and meets its needs.</u></p> <p>It is recommended that the department evaluate the frequency and effectiveness of training with automatic, contract, and mutual aid departments as it relates to fulfillment of the department's mission goals and objectives.</p>	<p>automatic and mutual aid companies are being evaluated by the GFD training staff on an annual basis.</p>	<p>1, 2018. See Exhibit "Departmental Training Program".  <b>ACR 2019:</b> The frequency of training with contract companies was monitored by the Training Division. A formal meeting was held with the Fire Chief from every contract company to discuss quality of training with the GFD companies. See Exhibit "Departmental Training Program".</p>	
<p><u>8B.4 The agency analyzes student evaluations to determine reliability of training conducted.</u></p> <p>It is recommended that written evaluations be conducted and analyzed for training classes administered to departmental personnel from internal and external sources.</p>	<p>ACR 2018: The GFD training staff will begin giving instructor evaluations to all students after every class delivered at the Public Safety Training Facility.</p>	<p><b>ACR 2018:</b> Was implemented on August 1, 2018. See Exhibit "Instructor Evaluation Form".  <b>ACR 2019:</b> Evaluation forms were utilized for each class taught by GFD personnel at the training center in 2019. See Exhibit "Instructor Evaluation Form".</p>	

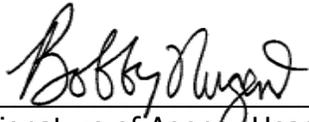


## Exhibit List

- Exhibit #1: [Station Matrix & Station Matrix Chart](#)
- Exhibit #2: [Strategic Plans, Goals & Objectives](#)
- Exhibit #3: [Annual Program Appraisal 5A.5](#)
- Exhibit #4 [Annual Program Appraisal 5B.3](#)
- Exhibit #5 [Annual Program Appraisal 5C.5](#)
- Exhibit #6 [Annual Program Appraisal 5E.3](#)
- Exhibit #7 [Annual Program Appraisal 5F.7](#)
- Exhibit #8 [Annual Program Appraisal 5G.3](#)
- Exhibit #9 [Annual Program Appraisal 5H.3](#)
- Exhibit #10 [Annual Program Appraisal 5I.2](#)
- Exhibit #11 [Call Processing Times](#)
- Exhibit #12: [Strategic Plan Goals & Objectives](#)
- Exhibit #13: [Future](#) & [Current](#) Fire & Life Safety Org Chart
- Exhibit #14 [5<sup>th</sup> Grade Elementary Fire Education](#)
- Exhibit #15 [Future](#) & [Current](#) Fire & Life Safety Org Chart
- Exhibit #16 [Incendiary Label](#)
- Exhibit #17 [FF Med Calls](#) [Non-FF Med Calls](#)
- Exhibit #18 [Protected Health Information](#)
- Exhibit #19 [EMS QIQA Meeting Minutes](#)
- Exhibit #20 [Company Officer Dev Support](#)
- Exhibit #21 [Policy Reviews](#)
- Exhibit #22 [COLA Roster](#)
- Exhibit #23 [Near Miss Policy](#)
- Exhibit #24 [AFAT Data Results](#)
- Exhibit #25 [Departmental Training Program](#)
- Exhibit #26 [Instructor Evaluation Form](#)

## Verification

I verify that the information contained in this report is complete and true to the best of my knowledge.

  
\_\_\_\_\_  
Signature of Agency Head

Fire Chief

\_\_\_\_\_  
Title

07/01/2019

\_\_\_\_\_  
Date