



FIRE AND EMERGENCY MEDICAL SERVICES DEPARTMENT

FY 2022 PERFORMANCE AND ACCOUNTABILITY REPORT

JANUARY 15, 2023

CONTENTS

Contents	2
1 Fire and Emergency Medical Services Department	3
2 2022 Accomplishments	4
3 2022 Objectives	5
4 2022 Operations	6
5 2022 Strategic Initiatives	8
6 2022 Key Performance Indicators and Workload Measures	13

1 FIRE AND EMERGENCY MEDICAL SERVICES DEPARTMENT

Mission: The mission of the Fire and Emergency Medical Services Department (FEMS) is to preserve life and promote health and safety through excellent pre-hospital treatment and transportation, fire prevention, fire suppression, rescue activities, and homeland security awareness.

Services: FEMS provides emergency medical services (EMS), fire suppression, homeland security and special operations response for the District of Columbia, including planned events and activities unique to the nation's capital. The Department is responsible for fire and life safety code enforcement, along with community based education and prevention programs. FEMS is the lead first-response agency for managing consequences resulting from natural disasters or other catastrophic events impacting the national capital region.

2 2022 ACCOMPLISHMENTS

Accomplishment	Impact on Agency	Impact on Residents
<p>Develop a strategic plan to implement NFPA 1500 requirements and update Respiratory Protection Plan (RPP). During FY 2022, the Department finalized the NFPA 1500 evaluation and is currently drafting a document to memorialize the assessment and outline a strategic plan to be used for compliance. As of the close of FY 2022 the document is 90% complete. The Respiratory Protection Plan (RPP) is awaiting decisions on the final components to be included. It is anticipated that the plans will be finalized by the end of Quarter 2 in FY 2023.</p>	<p>Improved safety in fire suppression will help our workforce remain healthy allowing for fewer employee injuries and illnesses.</p>	<p>Provides for lower costs for tax payers as a result of fewer employee injuries and illnesses.</p>
<p>Provide implicit bias training for firefighters, EMS personnel and company officers. During FY 2022, 1189 employees received implicit bias training, over 50% of the Department's workforce. The student evaluations were overwhelmingly positive about the instructors and content. The training will be repeated for the remainder of the workforce in FY 2023.</p>	<p>Implicit bias training will provide for more knowledgeable and prepared workforce.</p>	<p>Improved recognition and reduction of implicit bias will lead to better customer service and more effective patient care.</p>
<p>Redevelop current EMS training and mentoring program for recruits to add more field experience. During FY 2022, the Department redesigned the EMS training and mentoring program for new firefighter EMT recruits to successfully increase the time spent in the Training Academy. This includes 14 weeks of didactic training and 6 weeks on a transport unit. To date, the succession rate of students is an approximate percentage rate of 87% and on average each student is spending 90 hours training in the simulation lab.</p>	<p>Additional EMS education for new firefighter EMT recruits will help prepare our workforce earlier to better serve our residents.</p>	<p>Additional EMS education for firefighter EMT recruits will lead to better service and patient care for our residents.</p>

3 2022 OBJECTIVES

Strategic Objective	Number of Measures	Number of Operations
Embrace a supportive work environment focused on creating a safe, competent and professional workforce team.	3	7
Ensure that our facilities, vehicles, equipment and processes remain capable of supporting service delivery requirements.	3	6
Build collaborative relationships within our community to improve service delivery.	0	4
Deliver timely, high quality and effective services to better serve the needs of our community.	35	15
Create and maintain a highly efficient, transparent, and responsive District government.	11	0

4 2022 OPERATIONS

Operation Title	Operation Description	Type of Operation
Embrace a supportive work environment focused on creating a safe, competent and professional workforce team.		
Personnel	Attract, recruit and retain high performing and diverse workforce team members.	Daily Service
Training And Employee Development	Train and develop our workforce team members to become competent professionals.	Daily Service
Training And Employee Development	Train and develop our workforce team members to become professional leaders.	Daily Service
Performance Management	Continually strengthen our organizational culture to value community involvement and public service by our workforce team members.	Daily Service
Risk Management	Continually strengthen our organizational culture to improve the safety and health of our workforce team members.	Daily Service
Performance Management	Continually strengthen our organizational culture to recognize and appreciate the contributions made by our workforce team members.	Daily Service
Performance Management	Continually strengthen our labor/management partnership to collaboratively achieve organizational success.	Daily Service
Ensure that our facilities, vehicles, equipment and processes remain capable of supporting service delivery requirements.		
Property Management	Ensure that our buildings and facilities meet acceptable health, occupational, living and working requirements.	Daily Service
Field Infrastructure	Ensure that our emergency vehicles are reliably maintained, safely repaired and available for use.	Daily Service
Inventory Management	Ensure that our tools, equipment and supplies are reliably maintained, safely repaired and available for use.	Daily Service
Information Technology	Continually leverage technology to support our service delivery requirements.	Daily Service
Performance Management	Continually optimize resources to support our service delivery requirements.	Daily Service
Agency Financial Operations	Ensure that all resources supporting our service delivery requirements are fiscally sustainable.	Daily Service
Build collaborative relationships within our community to improve service delivery.		
Community Trust	Build and improve community trust by sharing information with the public and media.	Daily Service
Public Outreach	Build and improve relationships within our community to better understand service delivery expectations.	Daily Service
Performance Management	Build and improve relationships with other District agencies to better integrate services for our customers.	Daily Service
Performance Management	Build and improve relationships within the region to better share resources with our partners.	Daily Service
Deliver timely, high quality and effective services to better serve the needs of our community.		

(continued)

Operation Title	Operation Description	Type of Operation
Emergency Medical Services Operations	Compassionately care for our sick and injured patients.	Daily Service
Emergency Medical Services Operations	Improve services for our patients with time sensitive illnesses and injuries.	Daily Service
Public Outreach	Improve health safety awareness in our community through public outreach and education.	Daily Service
Fire/Rescue Operations	Quickly control and extinguish fires.	Daily Service
Special Operations	Rescue victims of fires and other emergencies.	Daily Service
Homeland Security	Prepare for natural disasters or other catastrophic events that may take place in our community.	Daily Service
Inspections	Reduce threats to the lives and property of our community residents by preventing fires.	Daily Service
Investigations	Reduce threats to the lives and property of our community residents by investigating the cause and origin of fires.	Daily Service
Public Outreach	Improve fire safety awareness in our community through public outreach and education.	Daily Service
State Safety Oversight Program	Reduce threats to lives and property in our community by providing safety and security oversight of the District Streetcar System.	Daily Service
Performance Management	Improve the timeliness of our services by monitoring and evaluating response time measures.	Daily Service
Performance Management	Improve the quality of our services by monitoring and evaluating the professional competence of our workforce team members.	Daily Service
Performance Management	Continually use information and analytics to guide decision making for improving our services.	Daily Service
Emergency Medical Services Operations	Identify alternatives for patients who routinely use our services for access to healthcare.	Daily Service
Performance Management	Build and improve public confidence in our services by exceeding customer expectations.	Daily Service

5 2022 STRATEGIC INITIATIVES

In FY 2022, Fire and Emergency Medical Services Department had 9 Strategic Initiatives and completed 88.89%.

Title	Description	Completion to Date	Update	Explanation for Incomplete Initiative
Launch a DC Resuscitation Committee to analyze the state of cardiac arrest outcomes.	During FY 2022, the Department will coordinate and launch a DC Resuscitation Committee (DCRC) that will analyze the state of cardiac arrest outcomes in the District of Columbia. The committee will include FEMS representatives and members from the Office of Unified Communications, DC Health, community health care organizations, and hospitals. The DCRC will determine the current challenges in improving outcomes; demonstrate the complexity of the system that responds to and treats cardiac arrest; and foster motivation to drive change for improvement in patient outcomes.	Complete	In FY 2022, the DC Resuscitation Committee (DCRC) was launched and met quarterly throughout the fiscal year. The committee included Fire and EMS Department representatives, Hospital and Emergency Department (ED) representatives, Office of Unified Communication (OUC) representatives, and District of Columbia community members	
Sponsor workshops on the promotional process to increase equity and inclusion.	During FY 2022, the Department will host three workshops for members preparing to take promotional tests for the ranks of sergeant, lieutenant, and captain in an effort to increase equity and inclusion in the promotional process. The workshops will be videotaped and provided to all department members. The following items will be covered: the process components and development of promotional exams; a review of study materials; effective study planning and techniques (including for students with learning disabilities), and a review of test-taking principles. (EQUITY INITIATIVE)	Complete	In FY 2022, the Department held three promotional exam workshops at the training academy for members preparing to take promotional tests. Several specialty units were on display to provide candidates exposure to equipment and units they might not normally come in contact with on a day to day basis. The exhibition included a Hazmat Unit, Tower 3, a Rescue Squad, and a Metro Rail Simulator.	

Public education program for elementary students.	During FY 2022, the Department will partner with DC Public Schools (DCPS) to deliver at least 25 public education programs (in-person or virtually) to elementary age students. The program will present age-appropriate fire safety education topics such as: Stop, Drop and Roll, What's Hot and What's Not, Smoke/CO Alarm identification and response, and Exit Drills in the Home.	Complete	During the 4th quarter of FY 2022, Fire Safety Educators held eight presentations for DCPS elementary age students and reached over 150 children. In total in FY 2022, educators delivered 33 presentations and reached over 850 individual students. The presentations focused on age-appropriate topics regarding the importance of fire safety and the appropriate actions to take in the event of an emergency.
Deliver a fire safety public education program to seniors with an emphasis on hoarding.	During FY 2022, the Department will partner with the DC Department of Aging and other community partners such as independent and assisted living senior residential buildings and management to deliver at least 50 public education programs entitled "Pathway to Safety." The virtual (online) or in person fire safety program will focus on hoarding and safety tips on how to declutter and reduce fire safety hazards. The program will include escape planning in case of fire, electrical and home heating fire prevention, smoking and oxygen safety, smoke alarm/carbon monoxide alarm maintenance, and fall prevention. Our Operations Division will receive training on how to recognize hoarding situations and report them appropriately and materials will be developed for members to provide to residents about resources that are available throughout the District.	Complete	During the 4th quarter of FY 2022, the Department delivered 12 hoarding recognition and reporting presentations and reached over 490 individual seniors. In total in FY 2022, educators delivered 33 presentations to over 1,500 individual seniors. All members of the Operations Division have received training in recognizing and reporting hoarding conditions and educators will continue to present the Pathway to Safety Program throughout the next fiscal year.

<p>Develop a strategic plan to implement NFPA 1500 requirements and update Respiratory Protection Plan (RPP).</p>	<p>During FY 2022, the Department will evaluate its compliance with National Fire Protection Association Standard 1500 and develop a strategic plan to implement improvements where needed. NFPA 1500 specifies the minimum requirements for an occupational safety and health program for fire departments or organizations that provide rescue, fire suppression, emergency medical services, hazardous materials mitigation, special operations, and other emergency services. Updates to the Respiratory Protection Plan (RPP) will be made to include the newest adopted OSHA requirements. The RPP provides guidance on protecting officers and members from oxygen deficient environments, toxins, gasses, contaminants, and contagions that may compromise the respiratory tract and other bodily systems.</p>	<p>75-99%</p>	<p>During the 4th quarter of FY 2022, the Department finalized the NFPA 1500 evaluation and is currently drafting a document to memorialize the assessment and outline a strategic plan to be used for compliance. As of the close of FY 2022 the document is 90% complete. The Respiratory Protection Plan (RPP) is awaiting decisions on the final components to be included. It is anticipated that the plans will be finalized by the end of Quarter 2 in FY 2023.</p>	<p>Final decisions on content with regards to the RPP have taken longer than anticipated due to the size and scope of the assessment.</p>
<p>Enlarge health and wellness program to include expanded assessments and counseling, workshops and member access to content.</p>	<p>During FY 2022, the Department will further grow its health and wellness program to include expanded fitness assessments and counseling; workshops with practical and classroom education for all members on maximizing performance through the “Eat, Sweat, Thrive” methodology. The program will also start providing access for all members to a tactical athlete portal that will allow each member to receive daily fitness and nutritional content and individualized custom reports.</p>	<p>Complete</p>	<p>During FY 2022, the Department expanded health and wellness education for members. Moving forward, a series of workshops is to be held in the fall of 2022 with four modules (topics) covered including Injury/Risk Reduction, Mental Performance, Building Resilience and Fueling for Performance.</p>	

<p>Provide implicit bias training for firefighters, EMS personnel and company officers.</p>	<p>During FY 2022, the Department will provide Department-wide implicit bias training to at least half (50%) of all firefighters, EMS personnel and company officers. This training will build on the Leading with Awareness sessions already delivered to executive senior staff and chief officers in FY 2021. The training will be designed to teach students the definition of implicit bias, how to recognize it in themselves and others, and how it impacts every day interpersonal interactions with peers, supervisors, and customers. The goal is to empower members with this knowledge so they can improve teamwork within their areas of responsibility, as well as to provide improved service to the diverse residents of and visitors to the District of Columbia. (EQUITY INITIATIVE)</p>	<p>Complete</p>	<p>During FY 2022, 1189 employees received implicit bias training, over 50% of the Department's workforce. The student evaluations were overwhelmingly positive about the instructors and content. The training will be repeated for the remainder of the workforce in FY 2023.</p>
<p>Build and launch a simulation lab for EMS education at the Department's Training Academy (TA).</p>	<p>During FY 2022, the Department will build and launch a new state-of-the-art simulation lab for EMS education at the Department's Training Academy (TA). Currently, all recruit and in-service EMS training is conducted in classroom lectures and with outdated, non-automated manikins. Recruit providers typically do not receive hands-on EMS skills training until they leave the academy and work with patients in the field. In-service training for tenured employees is also classroom based. This simulation lab will provide a risk-free hands-on environment that allows providers to make mistakes while practicing skills. This initiative will support improved patient care and outcomes in compliance with nationally established best practices. <Budget Enhancement></p>	<p>Complete</p>	<p>During FY 2022, the Denise Beales Immersive Lab and Education Center was opened and has become a vital part of our training experience at the academy. Scenarios for training have included conflict resolutions, at a skating park area, busy traffic situations, and medical scenes within the DC WMATA (Washington Metropolitan Area Transit Authority). Medical directors from New Orleans have traveled to see our model of education and we have had several other visitors from surrounding jurisdictions.</p>

<p>Redevelop current EMS training and mentoring program for recruits to add more field experience.</p>	<p>During FY 2022, the Department will redesign our EMS training and mentoring program for new firefighter EMT recruits to feature a longer training period in the Training Academy that will include five to six weeks riding ambulances in the field and education in the Department's new EMS simulation lab. Currently, the training is heavily focused on classroom lectures and "studying to the test" with minimal hands-on skill opportunities. New firefighter EMTs typically do not have real life experience with patients until after graduation and during their probationary period in the firehouse, which can lead to uneven training and standards. This will improve the preparedness of new firefighter EMTs to care for patients competently and compassionately.</p>	<p>Complete</p>	<p>During FY 2022, the Department redesigned the EMS training and mentoring program for new firefighter EMT recruits to successfully increase the time spent in the Training Academy. This includes 14 weeks of didactic training and 6 weeks on a transport unit. To date, the succession rate of students is an approximate percentage rate of 87% and on average each student is spending 90 hours training in the simulation lab.</p>
--	---	-----------------	---

6 2022 KEY PERFORMANCE INDICATORS AND WORKLOAD MEASURES

Key Performance Indicators

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Embrace a supportive work environment focused on creating a safe, competent and professional workforce team.											
Number of FEMS personnel injured while at work	Down is Better	335	329	300	87	72	72	101	332	Unmet	While we fell short of our target this year, the Department has revamped and improved accident reduction training and we expect to see a downward trend in injuries in the near future. Also, in FY 2022 training scenarios at our new simulation lab included busy traffic situations, and a series of workshops held through our expanded Health and Wellness program including a focus on injury risk reduction. Safety will continue to be emphasized as one of our Core Values.
Number of labor/management partnership meetings scheduled and attended by executive managers	Up is Better	49	66	36	24	15	12	16	67	Met	

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Number of FEMS operated vehicles involved in collisions	Down is Better	New in 2021	245	230	79	42	79	60	260	Unmet	Starting in FY 2021 we began improving, upgrading and increasing our accident reduction training in order to emphasize our safety culture. At the same time we revised our accident related KPI definition to better track preventable accidents (as collisions only). We believe we will see improvement in FY 2023 and meet our first goal of 230. Safety will continue to be emphasized as one of our Core Values.

Ensure that our facilities, vehicles, equipment and processes remain capable of supporting service delivery requirements.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of time ambulances in the FEMS emergency vehicle fleet were unavailable for daily operation because of maintenance or repair work	Down is Better	27.1%	24.1%	25%	32.9%	29.3%	28.8%	31.3%	30.6%	Unmet	Vendor issues regarding labor problems, parts availability, inflation, and supply chain delays have contributed to a substantial downturn in unit availability. Nevertheless, we continue to believe that maintaining our fire apparatus purchases on our replacement schedule, as well as efficiency improvements made at our Apparatus Division will eventually pay dividends and help us mitigate these issues to meet our goal moving forward.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of time fire engines in the FEMS emergency vehicle fleet were unavailable for daily operation because of maintenance or repair work	Down is Better	28%	24.5%	25%	34.1%	33.8%	32.4%	33.5%	33.5%	Unmet	Vendor issues regarding labor problems, parts availability, inflation, and supply chain delays have contributed to a substantial downturn in unit availability. Nevertheless, we continue to believe that maintaining our fire apparatus purchases on our replacement schedule, as well as efficiency improvements made at our Apparatus Division will eventually pay dividends and help us mitigate these issues to meet our goal moving forward.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of time fire ladder trucks in the FEMS emergency vehicle fleet were unavailable for daily operation because of maintenance or repair work	Down is Better	31%	29%	25%	39.9%	32.4%	36.6%	35.7%	36.1%	Unmet	Vendor issues regarding labor problems, parts availability, inflation, and supply chain delays have contributed to a substantial downturn in unit availability. Nevertheless, we continue to believe that maintaining our fire apparatus purchases on our replacement schedule, as well as efficiency improvements made at our Apparatus Division will eventually pay dividends and help us mitigate these issues to meet our goal moving forward.
Deliver timely, high quality and effective services to better serve the needs of our community.											
Percent of structure fire calls when a first responding fire engine arrived in 5 minutes 20 seconds or less	Up is Better	94.3%	91.8%	90%	94.6%	93.9%	93.7%	94.8%	94.3%	Met	
Number of fire safety education presentations completed for pre-school/kindergarten age children	Up is Better	61	22	200	93	36	59	80	268	Met	
Number home fire safety/smoke alarm installation visits completed for District residents	Up is Better	405	3193	2000	721	985	881	806	3393	Met	
Percent of residential structure fires where flame spread was confined to the room or structure of origin	Up is Better	97.5%	96.8%	95%	98%	100%	95.1%	No data available	No data available	Met	
Percent of residential structure fires where flame spread was confined to the room of origin	Up is Better	84%	82%	80%	85%	85.4%	78%	No data available	No data available	Met	

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of higher priority EMS calls when a first responding EMT arrived in 5 minutes or less	Up is Better	53.4%	50.6%	90%	49.2%	46%	49.5%	49.9%	48.7%	Unmet	Historically high hospital drop times and the related decreased availability of AMR units have significantly eroded the Department's unit availability to levels not see since 2015. This has negatively impacted EMS response times.
Percent of higher priority EMS calls when a first responding EMT arrived in 5 minutes or less and a Paramedic arrived in 9 minutes or less	Up is Better	43.7%	41.9%	90%	39.9%	38.9%	40.4%	40.6%	40%	Unmet	Historically high hospital drop times and the related decreased availability of AMR units have significantly eroded the Department's unit availability to levels not see since 2015. This has negatively impacted EMS response times.
Percent of highest priority EMS calls when a first responding EMT arrived in 5 minutes or less and two Paramedics arrived in 9 minutes or less	Up is Better	54.4%	51.9%	90%	50.9%	50.2%	52.6%	49%	50.7%	Unmet	Historically high hospital drop times and the related decreased availability of AMR units have significantly eroded the Department's unit availability to levels not see since 2015. This has negatively impacted EMS response times.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of higher priority EMS calls when a FEMS transport unit arrived in 9 minutes or less	Up is Better	77.8%	75.1%	90%	74.2%	73%	72%	69.7%	72.2%	Unmet	Historically high hospital drop times and the related decreased availability of AMR units have significantly eroded the Department's unit availability to levels not see since 2015. This has negatively impacted EMS response times.
Percent of all patients who were individually identified as being transported 10 or more times during a 12 month period by an FEMS transport unit	Down is Better	0.5%	0.5%	1%	0.4%	0.4%	0.4%	0.4%	0.4%	Met	
Number of participants who attended FEMS "hands only" CPR/AED familiarization training program events	Up is Better	5224	4155	25,000	499	613	3042	3892	8046	Unmet	The District's re-opening and comeback have allowed us to begin focusing our efforts on CPR training and we have been able to increase our training in FY 22 from 499 in the 1st quarter to 3,892 in the 4th quarter. Efforts will continue to get back on track in FY 2023.
Percent of all patient transports for patients individually identified as being transported 10 or more times during a 12 month period by an FEMS transport unit	Down is Better	5.1%	5.1%	10%	4.9%	4.7%	4.7%	4.6%	4.7%	Met	
Number of civilian fire fatalities	Down is Better	6	12	10	2	5	1	1	9	Met	
Percent of "structural" arson fires cleared by arrest or exceptional means	Up is Better	21.6%	18.3%	25%	21.7%	25%	25%	29.4%	25.3%	Met	

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of patients surveyed who indicated they "agreed" or "strongly agreed" that FEMS personnel acted courteous and respectful during an EMS call	Up is Better	92%	Not Available	95%	91.2%	100%	93.6%	93.4%	93.8%	Nearly Met	Historically high hospital drop times and the related decreased availability of AMR units have significantly eroded the Department's unit availability to levels not see since 2015. This has negatively impacted EMS response times. When this occurs, we see decreases in customer satisfaction.
Percent of patients surveyed who indicated they were "satisfied" or "very satisfied" with the services they received during an EMS call	Up is Better	92.2%	Not Available	95%	84.1%	94.2%	93.6%	93.9%	92.8%	Nearly Met	Historically high hospital drop times and the related decreased availability of AMR units have significantly eroded the Department's unit availability to levels not see since 2015. This has negatively impacted EMS response times. When this occurs, we see decreases in customer satisfaction.
Percent of structure fire calls when a first alarm assignment arrived in 9 minutes 20 seconds or less	Up is Better	89.5%	85.7%	90%	90.3%	83.8%	88.1%	91.1%	88.2%	Nearly Met	Call volume for fire engine companies continues to be a challenge. We are pleased though to have made some progress since FY 21 and have returned to almost meeting our goal like we did in FY 20.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of high-rise structure fire calls when a first alarm assignment arrived in 11 minutes 30 seconds or less	Up is Better	59.7%	63.8%	90%	74.1%	55.6%	61.5%	63.2%	63.6%	Unmet	Rising hospital drop times and call volume has a trickle-down effect on unit availability. These problems affect the availability of transport units because fire trucks are waiting on the scene longer for transport units and transporting to the hospital more frequently as the ALS resource. Due to these factors, when a high-rise fire is dispatched there is less fire unit availability which results in units being dispatched from further distances away creating longer response times.
Percent of EMS patient transport calls when a FEMS transport unit returned to service in 30 minutes or less after arriving at a hospital with a patient	Up is Better	18.2%	17.4%	50%	11.3%	14.3%	12.4%	10.1%	11.9%	Unmet	Historically high hospital drop times and the related decreased availability of AMR units have significantly eroded the Department's unit availability to levels not see since 2015. This has negatively impacted EMS response times.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of residential structure fires without a working smoke alarm	Down is Better	15.5%	13.2%	8%	11.1%	6.7%	7.6%	7.6%	8.3%	Nearly Met	We are very pleased that we have been able to make progress in this critical area in the last 3 years. It is clear that our efforts to install smoke alarms is paying benefits. Although we didn't quite meet our goal, we have improved each year since FY 2020 (15.5% in FY20 to 13.2% in FY 21 to well below 10% in FY 22).
Percent of EMS responses originating from a 911 request for patients who receive treatment to correct their hypoglycemia	Up is Better	New in 2021	68.9%	100%	71.4%	71.3%	74.6%	64.5%	69.5%	Unmet	The adoption of NEMSQA measures for the Department are still new, and we are just beginning to see performance data for this measure. In FY 23, we will continue to monitor after the transition to a new Records Management System to ensure adequate documentation methods. We have prioritized improvement of this measure.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percentage of EMS responses originating from a 911 request for patients less than 18 years old with primary or secondary impression of respiratory distress who had a respiratory assessment.	Up is Better	New in 2021	83.3%	95%	84.9%	87.4%	93.7%	95.9%	90.8%	Nearly Met	Despite a narrowly missed target for this measure, 4 quarters of consistent improvement while achieving a benchmark in the 4th quarter demonstrates no need to make additional improvements. In FY 23, we will continue to monitor after the transition to a new Records Management System to ensure adequate documentation methods.
Percent of EMS responses originating from a 911 request for patients 2-18 years of age with a diagnosis of asthma who had an aerosolized beta agonist administered	Up is Better	New in 2021	58.7%	100%	57.5%	66.4%	58.1%	59.9%	60.1%	Unmet	The adoption of NEMSQA measures for the Department are still new, and we are just beginning to see performance data for this measure. In FY 23, we will continue to monitor after the transition to a new Records Management System to ensure adequate documentation methods. We have prioritized improvement of this measure.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of EMS responses originating from a 911 request for patients less than 18 years of age who received a weight-based medication and had an estimated weight in kilograms or length-based weight estimate documented during the EMS response	Up is Better	New in 2021	90.4%	100%	100%	100%	100%	100%	100%	Met	
Percent of EMS responses originating from a 911 request for patients with status epilepticus who received benzodiazepine aimed at terminating their status seizure during the EMS response	Up is Better	New in 2021	52.5%	100%	44%	44.3%	34.2%	39%	40.5%	Unmet	The adoption of NEMSQA measures for the Department are still new, and we are just beginning to see performance data for this measure. We have prioritized improvement of this measure.
Percent of EMS responses originating from a 911 request for patients suffering from a suspected stroke who had a stroke assessment performed during the EMS response	Up is Better	New in 2021	96.8%	100%	99.4%	99%	99%	99.3%	99.2%	Nearly Met	We are pleased that we were able to increase our performance in order to practically meet our goal for this measure (99.2%).
Percent of EMS responses originating from a 911 request for patients with injury who were assessed for pain	Up is Better	New in 2021	11.2%	50%	16.7%	17.5%	19.2%	49.4%	26.6%	Unmet	Efforts were made to understand driving factors behind the low performance of this measure, and efforts were made in the 4th quarter of the year that resulted in increased documentation of pain assessments for injured patients.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of EMS transports originating from a 911 request for patients whose pain score was lowered during the EMS encounter	Up is Better	New in 2021	25.6%	100%	27.2%	13.9%	21%	24.1%	22.2%	Unmet	The adoption of NEMSQA measures for the Department are still new, and we are just beginning to see performance data for this measure. We have prioritized improvement of this measure through training and education.
Percent of EMS responses originating from a 911 request for patients who meet CDC criteria for trauma and are transported to a trauma center	Up is Better	New in 2021	79%	100%	80.8%	80.3%	80.2%	77.4%	79.5%	Unmet	The adoption of NEMSQA measures for the Department are still new, and we are just beginning to see performance data for this measure. We have prioritized improvement of this measure.
Percent of EMS transports originating from a 911 request during which lights and sirens were not used during patient transport	Up is Better	New in 2021	13.7%	50%	15.7%	13%	13.1%	13.5%	13.8%	Unmet	Given the current state and unsustainable strain on the emergency medical system in the District of Columbia, this measure will not be utilized moving forward in FY 2024.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percentage of NTL eligible patients who were triaged by NTL nurse, who responded to nurse call back within 24 hours of their call to the nurse, and who indicated they were “satisfied” or “very satisfied” with the services they received from the Right Care, Right Now Program.	Up is Better	New in 2021	92.3%	95%	92.5%	84%	87.5%	85.9%	87.5%	Nearly Met	This is a newly created KPI and the first year we tracked it with a goal of 95%. We will continue to monitor performance moving forward. It was observed that our drop in performance in FY 22 was partially attributed to low ratings associated with transport and not the NTL.
Percent of patients overall who experienced a sudden cardiac arrest that survived to hospital discharge	Up is Better	New in 2021	4.7%	10%	3.7%	5.8%	6%	6.5%	5.5%	Unmet	After seeing a decrease in performance for this measure during the COVID-19 pandemic, we are pleased to be observing some progress. In FY 23, we expect to see greater progress with more bystander CPR, improved technology, and the impact of increased cardiac arrest focused peer review capacity in the Office of the Medical Director.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of patients who experienced a sudden cardiac arrest that survived to hospital discharge with an initial rhythm of ventricular fibrillation (Utstein 1, "Survival Rate")	Up is Better	New in 2021	23.9%	40%	20%	16.7%	37.5%	57.1%	32.8%	Unmet	After seeing a decrease in performance for this measure during the COVID-19 pandemic, we are pleased to be observing this much progress, up from 23.9% in FY21 to 34.0% (this data is based on available data at the close of the year). In FY 2022, the national average for this measure was 25.0%. In FY 23, we expect to see greater progress with more bystander CPR, improved technology, and the impact of increased cardiac arrest focused peer review capacity in the Office of the Medical Director.
Percent of patients receiving CPR from a lay person, lay person family member or lay person medical provider and excluding first responders and/or EMS personnel	Up is Better	New in 2021	29.4%	50%	30.2%	25.5%	34.2%	36.3%	31.6%	Unmet	After seeing a sharp decrease in performance for this measure during the COVID-19 pandemic, we are pleased to be observing some progress. In FY 23, we expect to see greater progress with more bystander CPR as the District reopens and we train more residents in our Hands on Hearts program.

Key Performance Indicators (continued)

Measure	Directionality	FY 2020	FY 2021	FY 2022 Target	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022	Was 2022 KPI Met?	Explanation of Unmet KPI
Percent of patients with suspected cardiac etiology with an initial rhythm of ventricular fibrillation that survived to hospital discharge after experiencing a sudden cardiac arrest witnessed by a bystander other than 911 personnel and with CPR performed by a lay person (Utstein 2)	Up is Better	New in 2021	26.9%	50%	11.1%	20%	30%	75%	34%	Unmet	After seeing a decrease in performance for this measure during the COVID-19 pandemic, we are pleased to be observing this much progress, up from 26.9% in FY21 to 35.7% (this data is based on available data at the close of the year). In FY 2022, the national average for this measure was 28.5%. In FY 23, we expect to see greater progress with more bystander CPR, improved technology, and the impact of increased cardiac arrest focused peer review capacity in the Office of the Medical Director.

Workload Measures

Measure	FY 2020	FY 2021	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022
Agency Financial Operations							
EMS patient transport revenue	\$22,033,274	\$26,558,789	\$20,466,781	\$13,727,646	\$14,592,851	\$15,415,976	\$64,203,255
Fire Prevention fee and permit revenue	\$449,745	\$361,139	\$137,999	\$139,928	\$211,038	\$159,875	\$648,840
Emergency Medical Services Operations							
Number of EMS incidents	163,998	153,377	39,058	35,185	40,478	40,855	155,576
Number of FEMS patient transports	45,996	42,440	11,782	10,440	12,658	12,833	47,713
Number of "lower priority" (not time-sensitive) EMS incidents	101,649	96,887	24,560	22,041	25,024	26,664	98,289
Number of individually identified patients who were transported 10 or more times during a 12 month period by an FEMS transport unit	688	549	130	127	136	131	524
Number of patient transports for individually identified patients who were transported 10 or more times during a 12 month period by an FEMS transport unit	10,353	8183	2078	2040	2091	2058	8267
Number of "higher priority" (time-sensitive) EMS incidents	56,514	50,334	12,975	11,757	13,888	12,642	51,262
Number of "highest priority" (very time-sensitive) EMS incidents	5835	6156	1523	1387	1566	1549	6025
Number of individuals from diverted 911 calls transported to Regional Addiction Prevention (RAP) facility	New in 2022	New in 2022	No data available	43	88	56	187
Number of individuals from diverted 911 calls transported to Sobering Center	New in 2022	New in 2022	No data available	No data available	No data available	No data available	No data available
Fire/Rescue Operations							
Number of fire incidents	29,205	28,447	7759	7661	7511	8606	31,537
Number of "structure fire" incidents	2695	2627	706	720	633	620	2679
Number of "structure fires" extinguished	635	585	115	127	100	No data available	342
Number of "residential structure fires" extinguished	550	532	100	103	82	No data available	285
Number of "other fires" extinguished	1275	1034	110	78	123	No data available	311
Inspections							
Number of occupancies inspected	10,530	12,273	2756	2909	3076	3429	12,170
Number of fire code violations observed	16,521	23,227	4005	3573	4764	8274	20,616
Number of fire code complaints investigated	461	677	154	191	157	192	694
Investigations							

Workload Measures (continued)

Measure	FY 2020	FY 2021	FY 2022 Q1	FY 2022 Q2	FY 2022 Q3	FY 2022 Q4	FY 2022
Number of fires classified as "arson"	195	198	23	48	43	51	165
Number of "arson" arrests	16	21	5	4	3	2	14
Performance Management							
Number of emergency incidents	201,130	53,904	49,118	44,935	50,234	51,864	196,151