



February 28, 2008

To: City of Longview Council Members and Citizens

Re: **Substitute House Bill 1756 Compliance Report for Year 2007**

On October 26, 2006, the Longview City Council adopted the performance policy standards and objectives as outlined in the Standard of Coverage as prepared by the Longview Fire Department by Resolution No. 1845.

BACKGROUND

Substitute House Bill 1756 is derived from and a modified version of National Fire Protection Association Standard 1710 *Standards for the Deployment of Fire Suppression Operations, Emergency Medical Operations, and Special Operations to the Public by Career Departments*. Longview has not adopted NFPA 1710; however, it does remain a national standard against which emergency service delivery may be measured.

COMPLIANCE

Longview is a "code" city with a career Fire Department that provides fire protection services in a specified geographical area. Beginning in 2007, the City was required to comply with HB 1756, as legislated into law as RCW 35.103, using policies and objectives adopted by the Council in 2006.

INTENT

Substitute House Bill 1756 (referred to as RCW 35.103 from hereon) states, "The arrival of first responders with automatic external defibrillator capability before the onset of brain death, and the arrival of adequate fire suppression resources before flashover is a critical event during the mitigation of an emergency, and is in the public's best interest."

RCW 35.103 requires the Fire Department to extract response data and evaluate levels of service (LOS), service deployment methods, and performance measures that apply to response time objectives for certain major emergency services, and provide an annual report based on the evaluation to the City Council and the public.

This report is intended to describe how effectively the Department is meeting each Council-adopted "response time objective," and "explain the predictable consequences of any deficiencies" in meeting the response time objectives, and "address steps necessary to achieve compliance" with adopted objectives.

RISK MANAGEMENT

RCW 35.103 states that the code "does not, and is not intended to, in any way modify or limit the authority of cities and towns to set levels of service." The City is not required to adopt unrealistic or unattainable time objectives.

REFERENCES

References include:

- Implementation Matrix, Washington Fire Chiefs (WFC) and the Washington State Council of Firefighters (WSCFF)
- Creating & Evaluating Standards of Response Cover for Fire Departments, Commission on Fire Accreditation International
- WCIA Risk Management Bulletin #29, July, 2006
- 2005 Legislative Summaries, Ogden Murphy Wallace
- Literature Review
- Best Practices
- Other

ADDITIONAL BENEFIT

Adoption of the RCW 35.103 Compliance Plan has the additional benefit of facilitating the delivery of Executive Staff's Supporting Initiative "Provide a Safe and Healthy Community."

2007 COMPLIANCE REPORT

RCW 35.103 requires the evaluation of the Council-adopted levels of service, deployment delivery methods, and response time objectives on an annual basis. The evaluations are based on data relating to the levels of service, deployment, and the achievement of each response time objective established by Council.

The reporting format below is the one that will be used in subsequent years to report annual compliance with Council-adopted standards to the City Council and the public.

STANDARDS OF RESPONSE COMPARISON (STANDARD OF COVER)

To measure the ability to arrive and begin mitigation operations before the critical events of "brain death" or "flashover" occur, the Fire Department is required to establish response time objectives, and compare the actual department results on an annual basis against the established objectives. The comparison begins in 2007 with a comparison of the established response objectives against actual 2006 response times for the levels of response. This section provides that comparison and is compiled in Chart A.1.

- 1. Turnout and respond to all medical emergencies to provide basic life support (BLS) service in six minutes or less, 90% of time.**
 1. Standard was not met in 2007
 2. Performance standard was met 77% of time in 2007.
 3. Performance standard was met 66% of time in 2006.

- 2. Contract provider(s) turnout and respond to all medical emergencies to provide advanced life support (ALS) service in eight minutes or less, 90% of time.**
 1. Standard was met in 2007
 2. Performance standard was met 90% of time in 2007.
 3. Performance standard was met 90% of time in 2006.

- 3. Turnout and respond to all fire emergencies in six minutes or less, 90% of time.**
 1. Standard was not met in 2007
 2. Performance standard was met 62% of time in 2007.
 3. Performance standard was met 65% of time in 2006.

- 4. Full Alarm responses arrive to fire emergencies in nine minutes or less, 90% of time.**
 1. Standard was not met in 2007
 2. Performance standard was met 65% of time in 2007.
 3. Performance standard was not tracked in 2006.

- 5. Turnout and respond to all technical rescue and hazardous materials emergencies eight minutes or less, 90% of time.**
 1. Standard was not met in 2007
 2. Performance standard was met 82% of time in 2007.
 3. Performance standard was met 79% of time in 2006.

- 6. Mutual aid resources, once requested, respond to hazardous materials emergencies with appropriately trained and equipped hazardous materials technicians to perform Hazmat Technician Level activities one hour or less, 90% of time.**
 - o N/A; there were no technician level responses in 2007.
 - o N/A; there were no technician level responses in 2006.

| Response Standard No. | Response Type | Number of Incidents | Analysis By Incident | | | | Full Alarm Assignment | | |
|-----------------------|---------------------------|---------------------|---------------------------------------|--------------------|--------------------------------------|--------------------------|--|---------------------------|--------------------------|
| | | | Adopted 1st Arrive Response (minutes) | Emergent Incidents | Emergent Incidents Response Time 90% | Percent meeting Standard | Adopted 1st Alarm Arrival Response (minutes) | 90% Performance (minutes) | Percent Meeting Standard |
| 1 & 2 | Emergency Medical | 3503 | 6 | 1905 | 1463 | 77% | 8 | 1318 | 90% |
| 3 & 4 | Structural Fire | 37 | 6 | 37 | 23 | 62% | 9 | 24 | 65% |
| 3 | Automotive Fire | 28 | 6 | 28 | 21 | 75% | 9 | 21 | 75% |
| 3 | Brush Fire | 11 | 6 | 5 | 4 | 80% | 9 | 4 | 80% |
| 5 & 6 | HazMat & Technical Rescue | 16 | 6 | 2 | 0 | 0% | 60 | 16 | NA |
| | Other | 1890 | 6 | 653 | 511 | 78% | 9 | 511 | 78% |
| | Total Incidents | 5485 | 6 | 2630 | 2022 | 77% | | 1894 | 78% |

Chart A.1

PREDICTABLE CONSEQUENCES

Predictable consequences for the deficient standards above include the potential for greater deterioration in the patient/victim's medical condition, death, and increased property loss. Although response times are measurable as a risk factor, other inherent and varied risk factors that are less measurable also play a large role in outcomes, for example,

- time lapse between the onset of the emergency, discovery, and reporting
- distance traveled
- weather and road conditions
- adequate number of assembled resources on incidents
- access and traffic management features
- unavailable status of emergency units due to other emergencies
- emergency devices that allow bystanders to assist
- built-in fire detection and protection equipment, and
- type of construction and square footage.

Despite the various factors that affect outcomes that are outside the control of emergency responders, response times are one factor in the medical chain-of-survival and structure fire time-temperature curve that governments can affect.

Response Standard No. 2, turnout and respond to all medical emergencies to provide advanced life support (ALS) service in eight

minutes or less, 90% of time, reflects the highest level of response time achievement.

However, what is not reflected in this performance measure is the number of times ALS units are not available for response due to being assigned to other emergent calls or inter-facility transfers. The city has no obligation to provide EMS services by any statute, nor do agreements currently in place to impose any requirement for a minimum level of resources to be available for 911 response. The ALS (advance life support) and transport services are currently provided to the city's community through AMR (American Medical Response) and Cowlitz 2 Fire & Rescue.

The risk of having no available ALS care and transport for our citizens will continue to increase as 911 incident volumes rise, creating even more stress on the Fire & EMS response services.

Response Standard No. 4, assembling full alarm response within 9 minutes or less requires assembling 15 firefighters on a residential fire incident.

Fifteen Firefighters on an emergency incident is minimally sufficient to perform the critical rescue and firefighting tasks for residential fires. Twenty one firefighters are minimally sufficient for business and industrial fires. Structure fires are a dynamic event at which tasks and actions do not wait for all responding personnel to assemble, organize, and deploy. Rather, tasks are delegated as appropriate to the incident and available resources. The greatest predictable consequence for this standard is an increased risk of life and property loss caused by delay in hose stream application and the inability to ventilate heated gases and fire from the building.

CORRECTIVE ACTIONS

The following is a list of actions currently being implemented by the Fire Department to improve overall response times;

Awareness: At least quarterly, firefighters are made aware of the up-to-date turnout time standard which is part of the total response time. Being aware of the response time-standard gives firefighters a heightened sense of the importance of being quick to respond in hopes of improving the overall turnout time.

EMS Delivery System: The City of Longview is part of a county wide EMS delivery system. Fire and EMS entities of Cowlitz County are currently engaged in system planning; evaluating current level of service and identifying the critical stressors and gaps in the delivery system. One desired outcome will be determining what resources are needed to provide an adequate level of service and minimizing the time there are no EMS units available for response.

Triage Calls to 911: The Fire Department, along with our mutual aid agencies, will be evaluating how calls to 911 can be better managed through priority dispatching that either delays dispatching of certain low priority calls or even determining if there are types of calls that we discontinue responding to at all.

Classroom Training: Longview Fire and Cowlitz 2 Fire & Rescue will improve coordination and scheduling of training for Fire & EMS crews assigned to cover west Longview area so they can train together on a daily basis. This strategy will meet the multi-company training objectives while keeping resources in their response area more often.

The following is a list of actions that would require additional budgetary support;

Response Deployment and Strategy:

Longview Fire and Cowlitz 2 Fire & Rescue, through joint planning, are preparing a business plan that will identify a recommended response and deployment strategy which will provide options and alternatives for Council Members and Fire Commissioners to consider. The business plan is scheduled to be presented in May 2008.