Grant County Fire Protection District 3

POLICY AND PROCEDURE

- 1. NUMBER: 2.3.1
- 2. SUBJECT: **Performance** Analysis
- 3. POLICY: Normally, the only measurement of capability in the fire service has been to rely heavily on total numbers of alarms and patients. The following measures are developed to better analyze the service capabilities of the District. Periodically, the District will compile these and any other statistics in order to evaluate its performance and delivery system.
- 4. SCOPE: This Policy and Procedure is applicable to all personnel of Grant County Fire District 3.

5. **RESPONSIBILITIES:**

The District Fire Chief is responsible for assuring that the performance analysis is A. conducted in accordance with the direction of the Board of Commissioners.

6. **PROCEDURE:**

The following list comprises basic elements to evaluate when conducting a performance analysis.

A. Response Time of Basic Life Support:

Rationale and Definition. It is well documented that in severe medical emergencies, and particularly cardiac and respiratory emergencies, the condition of the patient and the patient's chances of recovery are directly linked to the elapsed time from the onset of the medical problem until treatment is administered. For patients in cardiac arrest, a significant improvement in survival rates exists if treatment (CPR) can be administered within four minutes from time of collapse. In addition, if an advanced life support unit is further than four minutes behind the fire department aid vehicle (an 8-minute total response time) quick arrival of the aid vehicle is directly related to patient survival. Measuring of basic life support response time will indicate the ability of the Fire District to provide care within recognized time frames. It will also indicate the effectiveness of station locations and efforts to improve response route congestion. Response time of basic life support will be defined as the elapsed time from when the dispatch center receives the call from the reporting party until the first dispatched fire department BLS unit arrives on location.

- B. Response Time of Intermediate Life Support: <u>Rationale and Definition.</u> Even though not within the direct control of the fire department, intermediate life support response time is an important indicator of the system's overall ability to provide definitive care to critically ill or severely injured patients. In situations where the patient's condition is not able to be maintained or improved by basic life support, intermediate life support skills can often bring about improvements in the patient's condition. The response time of intermediate life support will be defined as the elapsed time from when the dispatcher dispatches an ILS Unit, until the arrival of the ILS Unit.
- C. Response Time of Fire Suppression Capabilities: <u>Rational and Definition.</u> Initial fire attack and the ability or having an ability to maintain a sustained fire attack are paramount in our ability to deliver adequate fire protection. Most often, lives are saved, and property loss held to a minimum during the first ten to fifteen minutes of the fire or rescue operation. This is the initial period of fire attack. While sustained attack is necessary to terminate an emergency, its major purpose is to stop fire spread to other areas or buildings or to conduct prolonged rescue work. Response time for fire suppression will be defined as the elapsed time from when the dispatcher dispatches the fire suppression crews, until the arrival of the unit being studied.
- D. Initial Attack Crew Size and Sustained Attack Crew Size: <u>Rational and Definition.</u> Initial attack crew size will be defined as the available personnel that arrive at the scene (volunteer and paid) within the first 10 minutes of the time of initial dispatch. Sustained attack crew size will be defined as the total number of fire personnel utilized on the fire scene.
- E. Total Numbers and Rates of Occurrences of Specific Types of Incidents that will measure response capabilities and service demands:
 <u>Rational and Definition</u>. The ability to evaluate risk reducing actions lies within the ability to analyze trends and patterns that are developing for specific types of incidents. The following measures will be used to initially evaluate the level of service provided:
 - 1. Emergency Medical Service Demand
 - 2. Incidents of Fire
 - 3. Causes of Fire
 - 4. Fire Death and Injury Rates
 - 5. Hazardous Materials Incidents
 - 6. Fire Prevention Activities Delivered to the Community
- F. Emergency Medical Service Demand:

<u>Rational and Definition.</u> The Fire Department may have little, if any, impact on reducing the number of illnesses or injuries that occur. They can, however, through public first aid training, improve the abilities of the citizenry to deal with minor injuries themselves. Experience has shown that fire department units are sometimes dispatched to situations where care required only simple first aid procedures. It has been informally noted by first aid training providers, such as the American Red Cross, that citizens trained in first aid are less likely to require

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first aid treatment due to their own increased caution and understanding of the mechanisms of injury. To measure the overall reduction in emergency medical incidents, the number of patients per 1,000 population will be tracked.

G. Incidents of Fire:

<u>Rational and Definition.</u> Structure fires are most significant and two categories, residential and nonresidential, warrant independent tracking. Fires in residential structures present the obvious burdens of loss of personal belongings, loss of living quarters and severe financial pressures. Furthermore, 87% of all fire deaths nationally, have occurred in residential properties. Fires in nonresidential buildings present similar potential for property and life loss, and the possibility for economic loss to the business and the community due to loss of production time or employment. To track the incidents of fire, the measure of number of fires in residential and nonresidential structures per 1,000 population will be used. Population is used as the measurement base since people represent the true potential fire ignition sources.

H. Causes of Fire:

<u>Rational and Definition.</u> By tracking the causes of fire, it is often possible to spot trends and take action to reduce their impact. By far, human errors and lack of maintenance are the largest causes of fires. The effectiveness of public education efforts can perhaps best be analyzed by tracking the percentage of fires which are occurring as a result of human errors or lack of maintenance. Causes of fire will be the primary circumstance or situation that creates the fire or fire situation in accordance with records kept on the WIRS reporting system.

I. Fire Death and Injury:

<u>Rational and Definition.</u> In addition to tracking the incidents of fire, the impact on human life in fires that do occur is important. The numbers of civilian fire related deaths and injuries reflect on the ability of people to protect their own well-being in fire situations. This can be improved through public education directed at making homes and businesses safer so that fires that do occur are less severe. In addition, training people in the use of extinguishes on small fires, emergency exit procedures, and burn prevention, would be effective. Annual death and injury statistics will be tracked and expressed in total losses and per capita.

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