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County Executive

PRINCE GEORGE'S COUNTY GOVERNMENT

OFFICE OF MANAGEMENT AND BUDGET

November 3, 2022

MEMORANDUM

TO: Turkessa M. Green
County Auditor

THRU: Stanley A. Earley Director *SAE*
Office of Management and Budget

FROM: Tiffany D. Green, Fire Chief
Prince George's County Fire/EMS Department

RE: FY 2023 Operating/Program Review Questions
Prince George's County Fire/EMS Department

In an effort to facilitate an efficient and effective budget review and reporting process, we are submitting a separate request for operational and programmatic information. Please respond to the questions and complete any tables with the applicable data. In some cases, we have populated the tables with available known data. In instances where the tables need to be re-sized or modified to accommodate additional information, please feel free to do so. Please note, some of these questions were previously embedded in the overall first round budget question document. We are working to streamline that process and highlight the agency's operations outside of the routine budget process.

TRAINING

1. What are the various recertification requirements that the Department's personnel must maintain, including the number of training hours necessary to satisfy the recertification requirements? Last year the following were noted:
 - a. Respiratory Protection/SCBA Skills Training (Annual) 8 hours
 - b. Infectious Control Refresher Training (Annual) 1.5 hours
 - c. Hazardous Materials Refresher (Annual) 8 hours
 - d. Emergency Vehicle Operator Refresher (Annual) 8 hours
 - e. Emergency Medical Technician Refresher (Bi-Annual) 24 hours
 - f. CRT/Paramedic Recertification (Bi-Annual) 60 hours
 - g. Command Officer Continuing Education Requirements (Annual) 24 hours
 - h. Instructors (MICRB) must teach 60 hours and complete 12 hours of Professional development every 3 years.

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Please highlight any modifications to this schedule and/or additional training (with justification, *i.e.*, State/federal mandate).

The following changes were made to the recertification requirements for the Department.

- a. **Fire Investigator Law Enforcement Powers - 50 hours of training per year (40 hours of in service and 10 hours firearms)**
 - b. **Fire Investigator - 40 hours per year of certification maintenance training**
 - c. **Explosive Ordinance Detection (EOD) Technicians - 24 hours per month or 288 hours a year**
2. Please highlight any modifications to this schedule and/or additional training (with justification, *i.e.*, State/federal mandate).
- a. ISO training is required for all firefighters to ensure the Department achieves the highest optimal ISO rating.
 - b. Company Training – 16 hours per month
 - c. Facilities Training (Drill Tower or Live Fire Training Structure – 18 hours per year
 - d. Officer’s Training (Fire Officer’s Only) – 12 hours per year
 - e. Driver’s Training – 12 hours per year
 - f. Hazardous Materials Training – 6 hours per year

There are no modifications to the recertification requirements for the Department.

ORGANIZATION

3. Last year, it was reported that the Department employs 11 works schedules (shift structures). Is that still the current status? Is the Department still attempting to reduce the number of schedules, to control overtime expenses?

The Department currently employs eleven (11) work schedules. The Department will continue to explore staffing opportunities. This staffing dynamic does not increase the complexities associated with filling vacancies or other staffing challenges.

Day Work 5	1	839
Day Work 5 + 2 Shift Work	2	810 812
Day Work 6	1	814
Day Work 6 + Late Work	2	801 849
No Career Staffing	9	807 808 809 811 813 817 827 828 837
Shift Work 2 Surge Unit	1	833
Shift Work 5	7	819 824 831 834 836 843 855

Shift Work 6	12	802 816 818 820 821 835 840 841 842 845 847 848
Shift Work 7	4	805 830 844 846
Shift Work 8	6	806 823 825 830 832 838
Shift Work 10	2	826 829

To reduce overtime expenditures, the Department has reassigned many day work personnel to shift work.

SERVICE DELIVERY PLAN AND PERFORMANCE

4. Goal: To provide emergency medical services to County residents and visitors in order to reduce deaths and injuries from medical emergencies and traumatic events.

What are the top five types of fire calls for service the Department responded to in CY 2021?

The top five call types of fire in CY 2021 are:

STRUCF4	10,634
INVEST2	7,084
STRUCF2	2,662
OUTSID1	1,244
STRUCF6	1,008

- a. What are the top five types of BLS calls for service the Department responded to in CY 2021?

The top five types of BLS calls for service in CY2021 are:

BLS0	30,708
RESCUE1	19,969
BLS1	19,165
RESCUE3	11,007
BLS	5,421

- b. What are the top five types of ALS calls for service the Department responded to in CY 2021? **The top five ALS calls for service in CY2021 are:**

ALS1	57,018
ALS0	25,420
CPR	6,261
ALS	4,172
SUI	2,107

5. Goal: To provide fire suppression services to County residents and visitors in order to reduce death, injury and property loss from fire emergencies.

Objective: Reduce civilian fire deaths per 100 structure fires.

- a. How many County residents have died in CY 2021 as a result of fires? How many County residents received injuries in CY 2021?

There were eleven (11) resident fatalities and eighteen (18) resident injuries in the County in CY 2021.

6. Please outline the Department's efforts to prevent and decrease Fire calls for service. Last year, the Department outlined five measures: prevention through fire safety inspections for existing buildings; prevention through ancillary safety programs; prevention through ESC efforts; prevention through public information; and prevention through EMS initiatives. How effective have these efforts been? Are there any new initiatives or modifications to these existing measures?
- a. Please outline the Department's efforts to prevent and decrease ALS and BLS calls for service.

On a global perspective, reduction of ALS and BLS calls for service is targeted through community outreach and public education programs. Through these programs, citizens are provided with extended face-to-face contact with Fire/EMS responders from their community. This allows citizens to become better informed about the Department's emergency services; to learn when it should be accessed; and to provide community level emergency training necessary to save lives until the arrival of professional help. These educational outreach events include Battalion Coffee Club meetings with community stakeholders; local community events sponsored by community organizations and churches; Hands Only CPR and Stop the Bleed training events for bystanders; as well as many annual Open House events at local Fire Stations in various communities.

The Fire/EMS Department has engaged in Community Risk Reduction initiatives to prevent and reduce fire related calls for services. Over 133 community risk reduction events were held year-to-date in calendar year 2022. In addition, over 860 school-aged students from more than 15 different schools were educated about fire safety and were given hands on training in FY 2022.

- b. What entities does the Department partner with to achieve its medical calls for service reduction goals?

The Department established relationships and partnerships with the following entities to provide services to facilitate the reduction strategy goals of reducing 9-1-1 calls for service for non-emergent purposes: Prince George's County Department of Social Services; Prince George's County Department of Family Services; Health Quality Innovators; Laurel Advocacy; Maryland Cares; Maryland Physicians Care; Medstar Family Choice; the Prince George's County Health Department; Prince George's County Healthcare Alliance; Department of Veteran's Affairs; and the Prince George's County District Court.

7. Please provide an update on the Mobile Integrated Healthcare Model/Community Paramedic Program in Prince George's County. What is the status of this initiative? What resources have been allocated to this program in FY 2021 and FY 2022 to date? What accomplishments, if any, have been achieved so far? Has the Department evaluated the effectiveness of this initiative? What additional resources are necessary to continue to increase momentum and public awareness with this initiative to ensure increased usage within the community?

The Mobile Integrated Health (MIH) Program continues to identify and implement ways to enhance the program. The mission of the MIH Program has remained consistent. MIH identifies high frequency users of the 9-1-1 system and connects them with resources to prevent or reduce their need for the 9-1-1 system. MIH's primary and daily objective is to identify measures to increase client enrollment and provide quality services to those clients enrolled.

During the period between July 1, 2022 to September 30, 2022, the MIH program obtained 13 enrollees, all of whom met with our Social Worker and MIH Staff. During the initial intake, clients open up and explain their life experience as well as identify goals to be accomplished while enrolled in our MIH program. During this period, we conducted a total of 272 face to face contacts with enrolled clients (considering not all are comfortable with in person visits due to COVID-19 concerns). These visits were conducted in the individual's home as a traditional home visit, and several were conducted in a clinical setting such as the hospitals (at the hospitals request due to it being their referral). During this period, we have made 956 phone calls on behalf of clients to advocate for and connect to resources such as primary healthcare services, home health aide agencies, food pantries, transportation services and home modification services to name a few. The coordinators conduct 3-5 visits per week to assist clients. MIH coordinators are spending approximately 40 hours weekly to meet each client's needs. With our current staffing, there has been a 36% reduction in calls for our enrolled clients.

For FY 2021 and FY 2022, the Mobile Integrated Healthcare Program is staffed by three (3) paramedics and one social worker. The Department funded the social worker position as a full-time position. The social worker continues to be a great asset to the program. The responsibilities include assisting in identifying community resources, advocating for enrolled members, and providing guidance to MIH paramedics with navigating certain processes. MIH Program staff continues to operate on a day work schedule (M-F, 7:00am – 3:00pm) with the programs primary objective of addressing enrolled clients' needs to minimize utilization of the 9-1-1 EMS system for non-emergent reasons. During FY 2021 and FY 2022, resources allocated to MIH included two Fire/EMS Department SUVs, one full set of Advanced Life Support equipment including full cache of medications, cardiac monitor/defibrillator, an entire EMS suite to allow for each member of the MIH to have their own office space, and all necessary office supplies.

Outreach efforts have resulted in the addition of new resources and clients. The MIH program is currently working with the Behavior Health Alliance. They provide services to our clients such as medication management and management of chronic health conditions. MIH has a standing meeting with Doctor's Community Health to discuss opportunities for

additional resources and this partnership has resulted in additional clients. MIH assists with linking clients to home health aide services as needed. Goals and objectives have been recently updated and the MIH team has met with AFC Buckson on several occasions to establish performance measures. The program worked with the State EMS office to capitalize on technology that allows for electronic data management and a process that facilitates a more efficient process for referrals from clinicians in the field.

We have conducted a formative evaluation. Key performance indicators have been established, but we are working on a seamless process to collect data, as required. We are working with FirstWatch to develop triggers to collect data on demand.

The following elements are critical for the program's continued development:

- Additional human capital in the office and establishment of MIH field personnel
- MIH webpage
- MIH operating budget
- Access to a Nurse Practitioner

BEHAVIORAL HEALTH CALLS FOR SERVICE

8. Please provide the number and percentage of CY 2022 calls for service that involve individuals with behavioral health concerns.

In CY2022, the Department has responded to 419 incidents involving a behavior health emergency. This represents 0.03% of the total call volume.

9. How has the implementation of the new 988 Crisis Hotline impacted calls, procedures, and/or policy with the Department? Can you explain how the calls are handled from your side?

The pilot started on October 10, 2022. Data have yet to be collected and reported for the established key performance indicators. It has been a slow start. The last unofficial report indicated that just under 10 mental health calls have been diverted from 911. It is still too soon to determine the extent of the program's impact. The Public Safety Committee (PSC) will be providing performance measures, as requested.

EMS is dispatched as usual when the caller insists on receiving EMS Services. CCSI is taking this soft approach during the life of the pilot. In the absence of a co-presenting medical condition, CCSI reports that they will work diligently to prevent unnecessary EMS responses, even at the patient's request. EMS will work closely with police and CCSI to ensure that the patient experiencing a crisis is transported by the most appropriate entity, utilizing the least restrictive means possible. This may include transport by CCSI, or police when an EPS is implemented.

EMS may encounter calls where CCSI's mobile crisis team is the first to arrive at the patient's side. For voluntary patients, the mobile team will assess its ability to safely transport the patient to the hospital. In the event the mobile team deems it unsafe to transport the

patient, and the patient remains voluntary, EMS may be summoned to assess and transport the patient. Protocols surrounding these events are continuously reviewed during the pilot and beyond.

PROGRAMMATIC PERFORMANCE UPDATES AND TRENDS

10. Recognizing that you have previously provided a projected completion date of 10/22, can you provide an update on the comprehensive organizational and operational efficiency study being conducted by Fitch and Associates, which includes an integrated risk assessment and standards of response coverage review that would be utilized to determine current conditions, in conjunction with SWOT and Gap Analyses? As I understand it, this would ultimately be utilized in the development of the Master Strategic Plan. Can you provide an update on this topic too?

Fitch and Associates met with the Agency as well as community leaders on September 13, 2022, to complete the Community Strategic Planning process. Fitch and Associates will be onsite on November 14, 2022, to gather the final documents to complete the Master Strategic Plan.

11. What workload challenges have you encountered in FY 2022, or foresee in FY 2023?

Attrition will remain a major obstacle and challenge for the Department. The Department is unable to keep up with the rate of retirement/resignations. Also, it continues to be a challenge to attract and retain employees, both civilian and sworn. Many other employers in the region offer higher salaries, extensive alternate work (telework) options, and more flexible work schedules.

The trend of workload demand has continued over the past year, while volunteer participation has continued to decline in certain areas of the County. This created an unequal balance of resource production to meet the workload in some communities. Planned staffing enhancements for FY 2023 and 2024 will allow the Department to address production reliability in two (2) large geographic areas of the County. Despite the Department's efforts, there are still areas that have very poor staffing reliability.

Within the Apparatus Maintenance Division, the most significant challenge is the unpredictable supply of parts, materials, and services. The parts, pieces, and services that we depend on to maintain, service and provide ready front-line apparatus and vehicles is in crisis. The delayed and unavailability of these parts and services has created long out of service times for units, which makes them unavailable for emergency service. The cost of these materials, parts and services has dramatically increased. This creates budgeting problems and the possibility of units sitting out of service till funds can be re-allocated or requests for budget enhancements can be secured.

Apparatus, ambulance, and light duty vehicles costs are at an all-time high and are very unpredictable. An example is that some of the apparatus and ambulances have risen over 15 to 20 percent in the last year. These increased costs have lowered the number of units we

can purchase with the money allocated through the COP Funds. These decreased replacements due to the rising costs, will have a long-term effect on the repair budget. Older vehicles will stay in the fleet longer and will increase repair costs and out of service times. As responses to emergencies increases, the wear and tear on the units responding has a trickle-down effect on the availability of reserve units, down time due to maintenance, and repair issues.

Within the Fire Investigations Division (FID), staffing shortages have presented challenges in keeping up with increased workload. Overtime costs have increased to cover shifts, for investigators conducting follow up investigations, and to ensure investigators can attend the training needed to maintain certifications. The office attempts to reduce overtime by utilizing personnel that are working daywork to cover when shiftwork personnel are off or busy during the day.

Within the Logistics and Facilities office, the continued growth of the department, the increase in service demand of the department, and the continued aging of the department's facilities have and will continue to increase the workload. The office is responsible for supplying the entire department with PPE gear, supplies, tools, equipment, uniforms, narcotics/medications, ALS and BLS equipment, and medical supplies. The lack of staffing to support this increase creates a challenge for an organization that operates 24/7/365.

The Fire Protection and Life Safety office workload has increased as the staffing was decreased to accommodate the COVID relief. The office remains understaffed as the department needs personnel in Operations to provide 911 service to the community. With the decreased staffing, keeping up with the normal demand for fire inspections and plan reviews and the increased demand that comes with the growth in the County has been and continues to be a challenge. Although the inspections are eventually completed, the timeliness and the ability to be proactive with target hazard facilities such as nursing homes, schools, County buildings, etc. has been virtually impossible. Unless the staffing is increased, we do not see this improving.

MISCELLANEOUS

12. Each year, you provide an electronic color map of fire stations and battalion boundaries. Have there been any modifications from the last submittal?

There have been two modifications to fire stations/battalion boundaries. New Fire/EMS Station 802, Shady Glen, was placed in service on June 5, 2022. Also, Station 808, Seat Pleasant VFD was place out of service. Please refer to Attachment 1 for the updated map.

PARTNERSHIPS

13. If the Department operates in a collaborative manner with other County agencies, please list the County agencies the Department has a partnership with and briefly describe the nature of the partnership in FY 2022.

The Department operates cohesively with the following County agencies:

Department of Homeland Security- This office oversees Public Safety Communication (PSC) and the Office of Emergency Management (OEM). PSC dispatched Fire/EMS units as requested by internal and external stakeholders. Also, during any significant event, OEM can assist the Fire/EMS Department with resources or planning. This could include weather, fire, or healthcare related emergencies.

The Health Department also played a role in providing COVID test supplies and tracking COVID cases.

Law Enforcement – The Department frequently engages in joint training exercises with various branches of law enforcement.

The Apparatus Maintenance Division (AMD) works daily with the County's Fleet Department as it relates to supporting vehicle purchases through the County's Certificate of Participation (COP) program.

The Fire Investigations Division (FID) partners with the Prince George's County Police Department. Currently we have four officers assigned to FID. This is part of the MOU with PGPD and TEMS. These officers are assigned full time to FID and are fire investigators performing cause and origin investigations.

Logistics and Facilities works with the Office of Central Services (OCS) on a regular basis for service contracts for our protective gear, uniforms, badges, ALS and BLS equipment, operational equipment, alerting services for our first responders, facility contracts, planning, design and concept reviews, renovations, and new construction facilities maintenance, service calls/repairs, and work orders. They work with the Department of Permitting, Inspections, and Enforcement (DPIE) for the permitting of fire stations, inspections, and new construction. They also work with the Maryland/National Capital Park and Planning on new construction projects and permitting.

14. If the Department operates in a collaborative manner with the non-profit and other community-based organizations, please list such organizations the Department has a partnership with and briefly describe the nature of the partnership in FY 2022.

The Department works with the following non-profit and community-based organizations:

- a. **Prince George's County Fire/EMS Foundation** to provide additional resources to assist in providing services to the citizens of Prince George's County.
- b. **Training and Leadership Academy** partners with the Federal Law Enforcement Training Center (FLETC) to provide space for the training academy.
- c. **The Fire/EMS Department** provides training and equipment for the Prince George's County Public School's High School Fire Cadet Program.
- d. **The Fire/EMS Department** also partners with all Volunteer Fire Corporation to provide Fire/EMS Services to the citizens of Prince George's County.

ATTACHMENT 1



Prince George's County Fire/EMS Department

Fire/EMS Stations

STATION	STATION_NAME	ADDRESS
801	HYATTSVILLE	6200 BELCREST RD
802	SHADY GLEN	116 SHADY GLEN DR
805	CAPITOL HEIGHTS	6061 CENTRAL AVE
806	ST JOSEPHS	2901 ST JOSEPHS DR
807	RIVERDALE	4714 QUEENSBURY RD
809	BLADENSBURG	4213 EDMONSTON RD
810	LAUREL	7411 CHERRY LA
811	BRANCHVILLE	4905 BRANCHVILLE RD
812	COLLEGE PARK	8115 BALTIMORE BLVD
813	RIVERDALE HEIGHTS	6101 ROANOKE AVE
814	BERWYN HEIGHTS	8811 50TH AVE
816	NORTHVIEW	14801 HEALTH CENTER DR
817	BOULEVARD HEIGHTS	4101 ALTON ST
818	GLENN DALE	11908 GLENN DALE RD
819	BOWIE	13008 9TH ST
820	MARLBORO	14815 PRATT ST
821	OXON HILL	7600 LIVINGSTON RD
823	FORESTVILLE	8321 OLD MARLBORO PIKE
824	ACCOKEEK	16111 LIVINGSTON RD
825	CLINTON	9025 WOODYARD RD
826	DISTRICT HEIGHTS	5900 MARLBORO PIKE
827	MORNINGSIDE	8200 SUTLAND RD
828	WEST LANHAM HILLS	7609 ANNAPOLIS RD
829	SILVER HILL	3900 SILVER HILL RD
830	LANDOVER HILLS	6801 WEBSTER ST
831	BELTSVILLE	4911 PRINCE GEORGES AVE
832	ALLENTOWN ROAD	8709 ALLENTOWN RD
833	KENTLAND	7701 LANDOVER RD
834	CHILLUMADELPHI	7833 RIGGS RD
835	GREENBELT	125 CRESCENT RD
836	BADEN	16608 BRANDYWINE RD
837	RITCHIE	14115 RITCHIE-MARLBORO RD
838	CHAPEL OAKS	5544 SHERIFF RD
839	BOWIE	15454 ANNAPOLIS RD
840	BRANDYWINE	13809 BRANDYWINE RD
841	BELTSVILLE	3939 POWDER MILL RD
842	OXON HILL	1100 MARCEY AVE
843	BOWIE	16400 POINTER RIDGE DRVT
844	CHILLUMADELPHI	6330 RIGGS RD
845	MARLBORO	7710 CROOM RD
846	KENTLAND	10400 CAMPUS WAY SOUTH
847	ALLENTOWN ROAD	10900 FORT WASHINGTON RD
848	WEST LANHAM HILLS	8501 GOOD LUCK RD
849	LAUREL RESCUE SQUAD	14910 BOWIE RD
855	BUNKER HILL	3716 RHODE ISLAND AV
858	NATIONAL HARBOR	251 MARINER PASSAGE

