

MONTGOMERY COUNTY FIRE & RESCUE SERVICE



2022 CFAI ANNUAL APPRAISALS

Contents

PURPOSE.....	2
COMMUNITY RISK REDUCTION	3
DOMESTIC PREPAREDNESS.....	13
FIRE SUPPRESSION.....	15
FIRE & EXPLOSIVES INVESTIGATIONS.....	19
EMERGENCY MEDICAL & INTEGRATED	21
HEALTHCARE SERVICES.....	21
TECHNICAL RESCUE	29
HAZARDOUS MATERIALS INCIDENT RESPONSE TEAM.....	35
URBAN SEARCH & RESCUE (MD-TF1)	38
PUBLIC SAFETY TRAINING ACADEMY	45
COMMUNICATIONS.....	51
HEALTH & SAFETY	54

PURPOSE

This document is a compilation of all the program appraisals that are required to be completed under the Center for Public Safety Excellence Fire and Emergency Services Self-Assessment Model, 10th edition. Annual appraisals are required to determine the impact and outcomes of a program.

The 10th edition added several new appraisals to the process: Domestic Preparedness, Training, and Health and Safety.

Category 5, *Community Risk Reduction Program*, includes those programs that are a direct output of the Community Risk Analysis Standard of Cover document. Fire investigation, domestic preparedness, suppression, emergency medical services, technical rescue, hazardous materials, and *other* services fall under this category (Criteria 5C, 5D, 5E, 5F, 5G, 5H, and 5L, respectively). In previous years, MCFRS also considered aviation rescue, but since Montgomery County does not have an FAA-indexed airport, the decision was made to not assess this program area.

Prevention programs (5A, managed by Fire Code Compliance) and public education programs (5B, managed by MCFRS Community Risk Reduction Section) are also included in Category 5.

Category 8, *Training and Competency*, reflects the department's training and education efforts.

Category 9, *Essential Resources*, defines those mandatory services and systems required for the department's operational programs to function. Communication systems falls under this category (Criterion 9B).

Category 11, *Health and Safety*, examines the department's health and safety efforts to recognize, address, and analyze the workplace and apply risk management principles with the intent to reduce employee injuries.

FESSAM CATEGORY 5 PROGRAM APPRAISAL COMMUNITY RISK REDUCTION

1. CRITERION & PROGRAM AREA

5B - Public Education

2. PERIOD OF APPRAISAL

CY 2022

3. PROGRAM AREA MISSION STATEMENT

The role of the fire service has expanded over the years into an all-risk, all-hazard emergency service. The department strategically addresses this through proactive, focused prevention efforts driven by local data. Community Risk Reduction (CRR) identifies and prioritizes fire and life safety risks and then focuses on mitigation, education and prevention strategies in the community. Prevention is identified as a core principle to drive CRR across all levels of the department. Using this model, the department and CRR train and educate members of the community to identify and reduce risks resulting in fewer fires, fewer emergency calls, fewer 911 calls and more lives saved through strategic CRR. The CRR mission is to make Montgomery County one of the safest communities in the nation and to protect life and property using a prevention-first approach to get ahead of incidents before they occur. CRR uses a wide variety of tools to develop programs focused on reducing the occurrence and impact of local risks. The “5 E’s” is one of the strategies used which includes education, engineering, enforcement, economic incentives, and emergency response. CRR provides a focused and targeted approach designed to identify and prioritize local risk areas and vulnerable and/or underserved populations. The CRR team continues to add innovative tools to assess risks in the community to leverage and integrate CRR solutions and programs to build and sustain resilient communities.

4. PROGRAM AREA RESOURCES & INPUTS

There were no changes to personnel within the Community Risk Reduction/Community Outreach section in CY22. The workload is managed by the section manager, two program managers, and one part-time (contract) program manager. The section continues to be challenged to meet the high demand of requests for education and prevention programs. The introduction of virtual meetings, presentations and appointments to CRRs lineup of services has been an overwhelming success and has resulted in a monumental shift from the pre-pandemic work environment. Trends in virtual CRR requests have accelerated and raised the bar on how the team delivers CRR training -- often reaching many more attendees/participants through interactive social media platforms (Zoom, Teams, Facetime, etc.), while at the same time, generating a high volume of new requests.

The department’s priority in creating a culture of community safety starts with the recruit classes. Since 2017, the CRR Team has provided CRR education and training during MCFRS recruit school. MCFRS has been recognized as the first department in the nation to require recruits to take the USFA’s “*Essentials to Community Risk Reduction*” online course as part of recruit training and graduation.

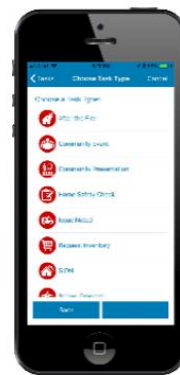
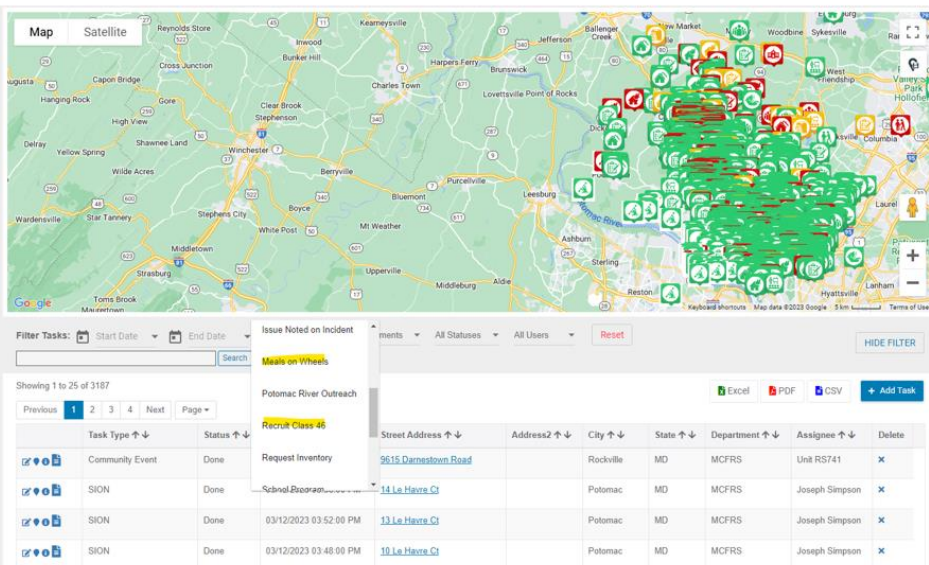
Data is a critical business asset for CRR and CRAIG1300 and the Athena App are two key drivers of data for our section. These data tools are used for both training and roadmaps to direct efforts to make resource and program decisions. The tools help ensure the highest probability of positively impacting our community and efficient resource deployment by integrating both incident data (exported in our CRAIG1300 dashboard) and documentation of CRR efforts (captured on the Athena CRR App) across the community are used to generate critical insights. While the pandemic delayed the full deployment of the Athena App across the department, the App was successfully launched this year (CY22) and personnel quickly embraced the versatility and ease of using the App to capture data.



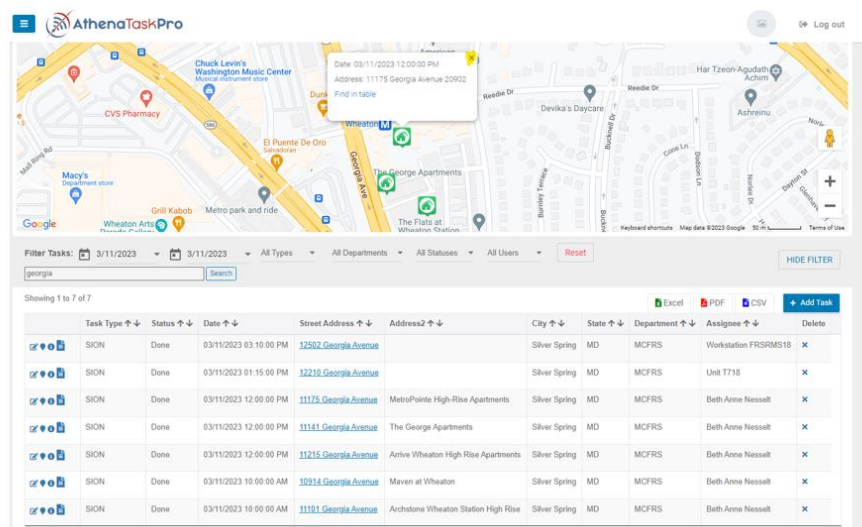
A few “behind the screen” looks at the App from the Dashboard side:

The App is designed to be dynamic. We can “add” Task Types (see highlights below) to further customize reporting. We have done this with special events (Recruit Classes, Meals on Wheels, etc) and then are filtered out of the regular line up of choices. We could have designed a custom Task for this for the 3-day campaign making outputs in reporting easier to calculate however it also limits what the field can elect to do (community event, SION, After the Fire, Smoke Alarm Installs, etc.). We could also have customized with a Task Type for high-rises. Ultimately we deferred to user to choose the Task and SION to capture data.

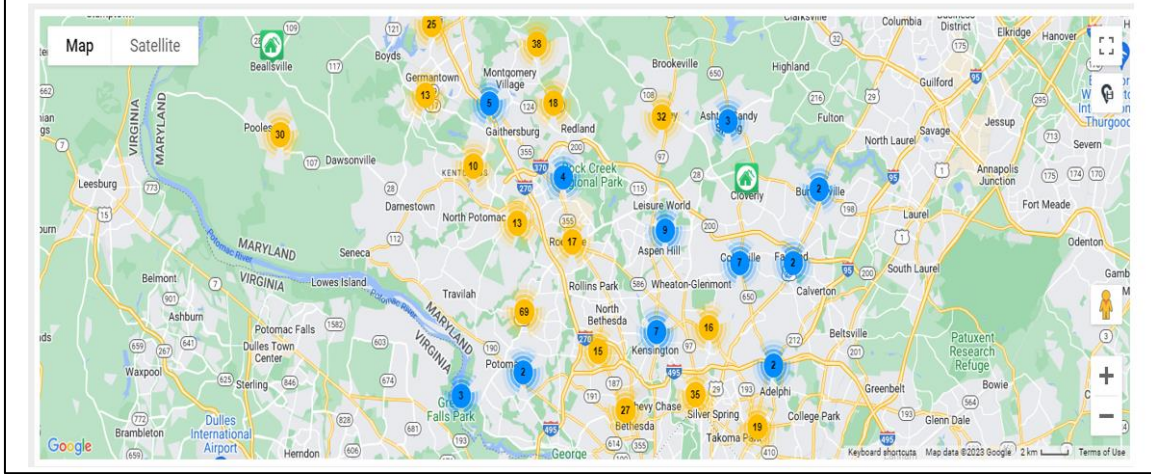
This busy map show all the ‘CRR’ going on in the community! As you select icons or add filters, it drills down and looks less like LaGuardia on a Friday ...



Below you see how you can filter and select an address from the Dashboard, see it on the map and if you choose “Find it in Table” you will get a summary of what actions took place at that address. Here you’ll see I filtered by “Georgia” to generate data on non-sprinklered High Rise safety blitz in information by date.



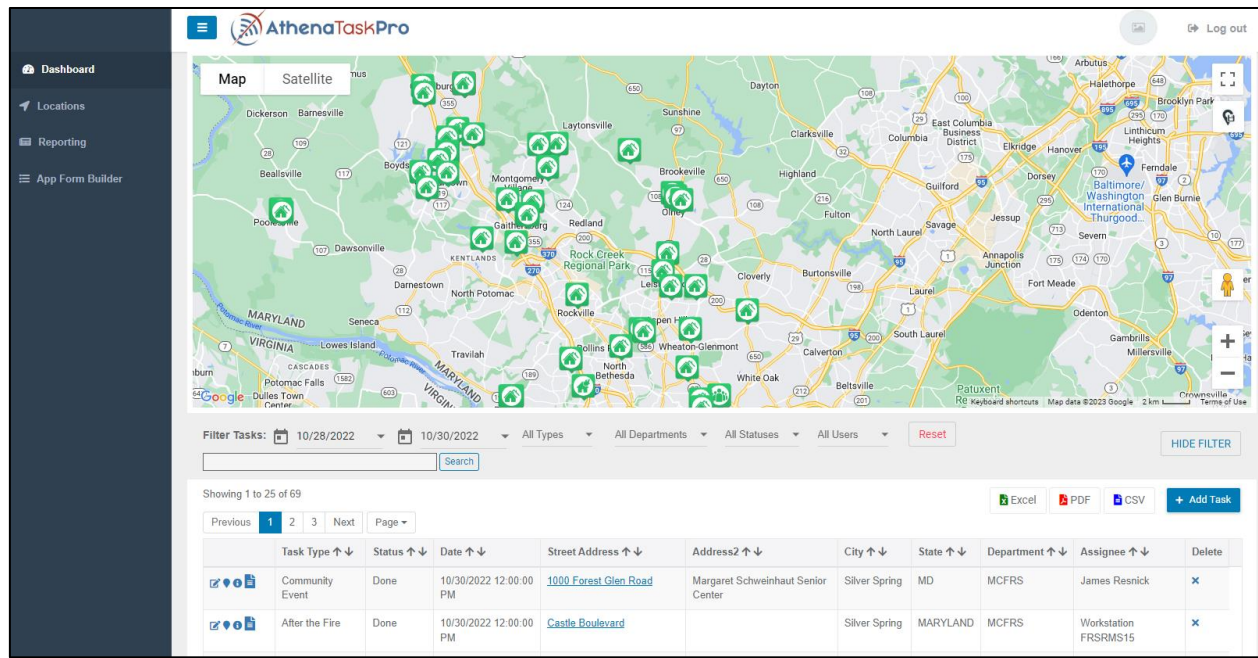
Another Dashboard view (screenshot) that let's you see at a high level the # of Task Reports filed. As you zoom in on an area, you get more precise detail and the option (see green house in Cloverly) to click on the icon and see the report of what actions MCFRS took at the address.



5. PROGRAM AREA OUTPUT, OUTCOMES & IMPACT

CRR was busy in 2022! A successful CRR program requires top-down management support, and we are fortunate to have that at MCFRS. The advocacy, leadership and support of our Fire Chief and key staff has been the critical foundation for the success and impact of our CRR programs. Understanding the challenges faced by those in our community can help us better assist the people we serve. Vulnerability comes in many forms: economic, health, educational, social, and environmental and understanding our community's social vulnerability that may put them at higher risk for emergencies is critical. Using a data-driven risk assessment and "After the Fire" Dashboard Reports help the department to better understand the incidents that may be over-taxing crews. Root cause analysis can lead to strategic problem solving. Partnerships can provide solutions that alter the course of response and be better positioned to fill the gaps for patients who may benefit more from social services support than a transport to the hospital. CRR leverages local partnerships to ensure equitable and efficient deployment of resources.

CRR is focused on meeting the varied needs of the community. Following a significant lithium-ion battery fire involving an e-scooter in a non-sprinklered high-rise building, the Operations Chief announced a 3-day County-wide safety and CRR effort. Below is a quick visual map on some of the impact of the campaign. The Athena App was used by MCFRS personnel, and the data input was impactful, creative, and featured throughout our social media platforms. The App was highly effective in documenting CRR efforts and providing real time information on activities throughout the County. Even photos of crews engaging with the community can be transmitted with reports in the App, documenting efforts and providing another innovative feature of the App.



The MCFRS Community Risk Reduction team continues to excel in identifying and delivering innovative and creative programs to internal and external customers. The CRR Team is considered a leader locally, regionally, and nationally, and this distinction is a direct reflection of the Fire Chief’s commitment to residents and overarching goal to “get ahead of the 911 call” through education, outreach, awareness and the commitment of personnel and the hard work of CRR staff, which has been instrumental in the department’s work towards a fire safe and fire smart Montgomery County. A quick snapshot of selected performance measures is featured in the CRR Dashboard on the following page.

CRR Dashboard – CY22



Key Performance Indicators



354

Home Safety Checks



987

Smoke Alarms Installed



36

After the Fire Events



178

Carbon Monoxide Alarms Installed



1884

Child Safety Seats Installed



898

Community Presentations



88

Community Events

of Recruits Trained in CRR since May 2017



Social Snapshot



Website Traffic

- CY22 Total Pageviews: 704,983
- CY21 Total Pageviews: 685,412
- CY20 Total Pageviews: 697,441
- CY22 Web Visitors – 130,839



Blogspot

- CY22 Blogs Published – 20



Twitter

- CY22 Annual Impressions **3.3M**
- CY21 Annual Impressions: **4.3M**
- CY20 Annual Impressions: **4.4M**
- Followers 44,500

Our team serves as the department’s marketing hub and we are responsible for building brand recognition, successful and impactful marketing campaigns, countywide campaigns, education programs for residents, stakeholders and others to influence safety, resilience and increase awareness. Highlights from CY22 are featured in our CRR Dashboard and include our website (mcfrs.org/mcsafe), our presence on Twitter, Blogspot and other mediums. CRR makes every attempt to provide bilingual campaigns on critical topics, and bolsters this effort with a dynamic, bilingual CRR team.

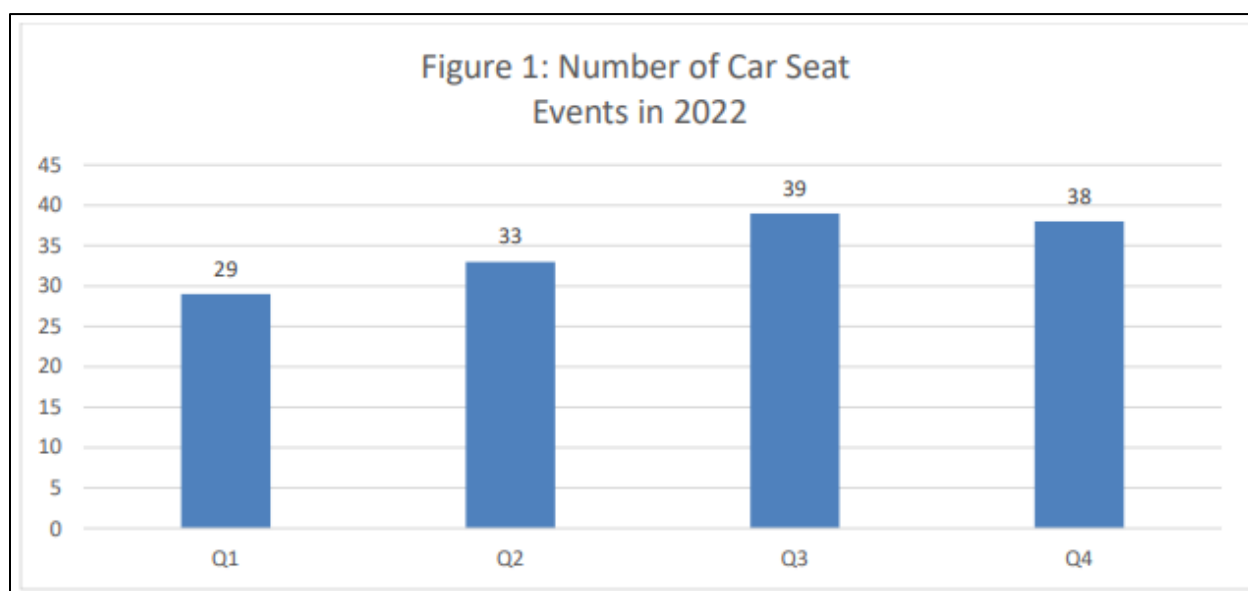
Outreach to the young

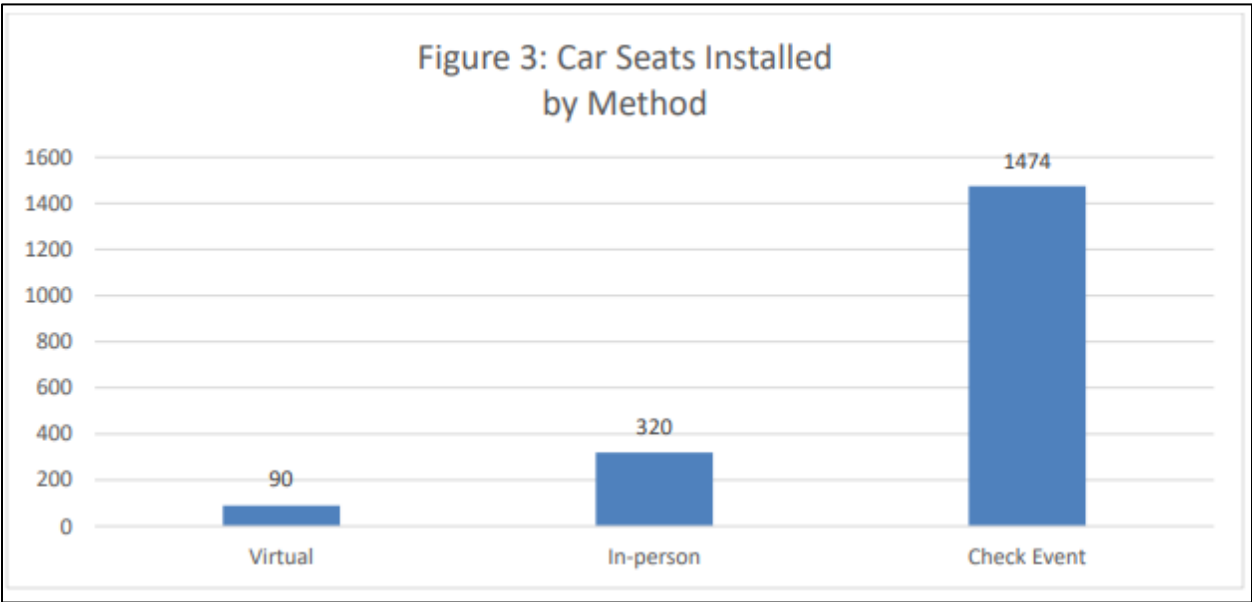
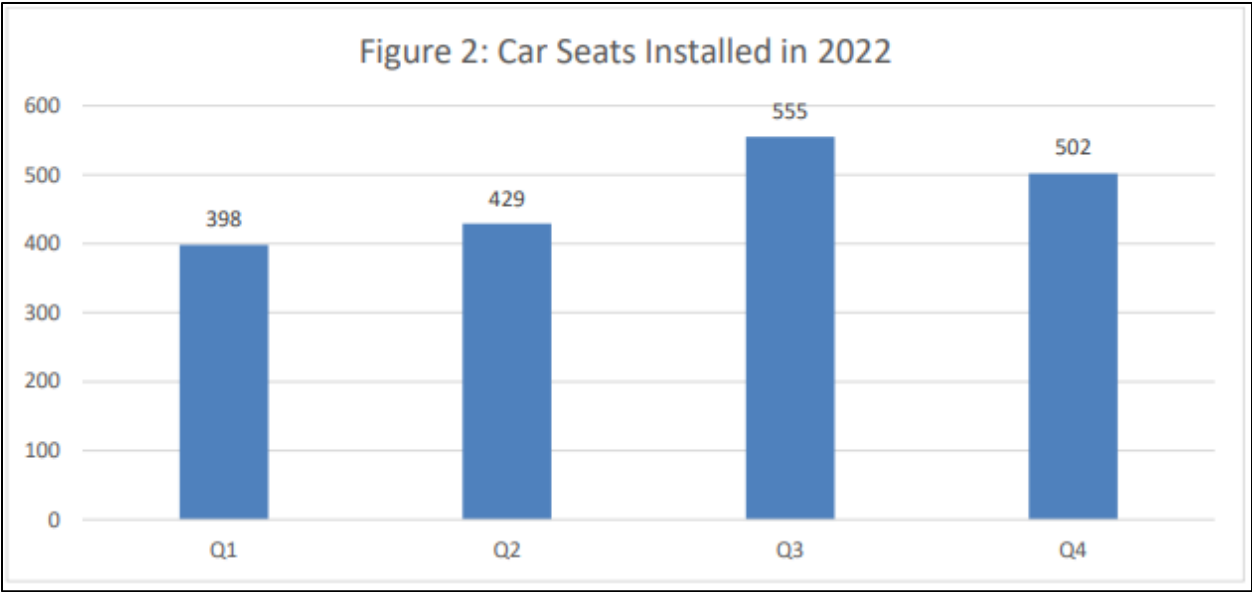
In 2022, MCFRS was selected to participate in the pilot of a national school-based program called “Sound Off.” The program was introduced and has had significant impact resulting in almost a 50% increase in knowledge gained through participation in the program (2nd and 3rd grade). Montgomery County Public Schools (MCPS) is the largest school district in Maryland and the 14th largest in the United States. There are 131 elementary schools and 35 are designated Title I Elementary Schools. The CRR team has struggled to keep up with demand by schools requesting the very popular and effective program aligned with curriculum standards. Plans have been made to introduce a virtual curriculum and expand training to teachers to deliver the program in the future as a strategic approach to provide critical fire safety education to elementary school students with a focus on Title I schools. MCFRS is planning to introduce virtual options that are under development to meet demand when CRR and fire department staffing resources are unavailable. The MCFRS CRR Manager is on the national committee for the development of the virtual, online Sound Off program.

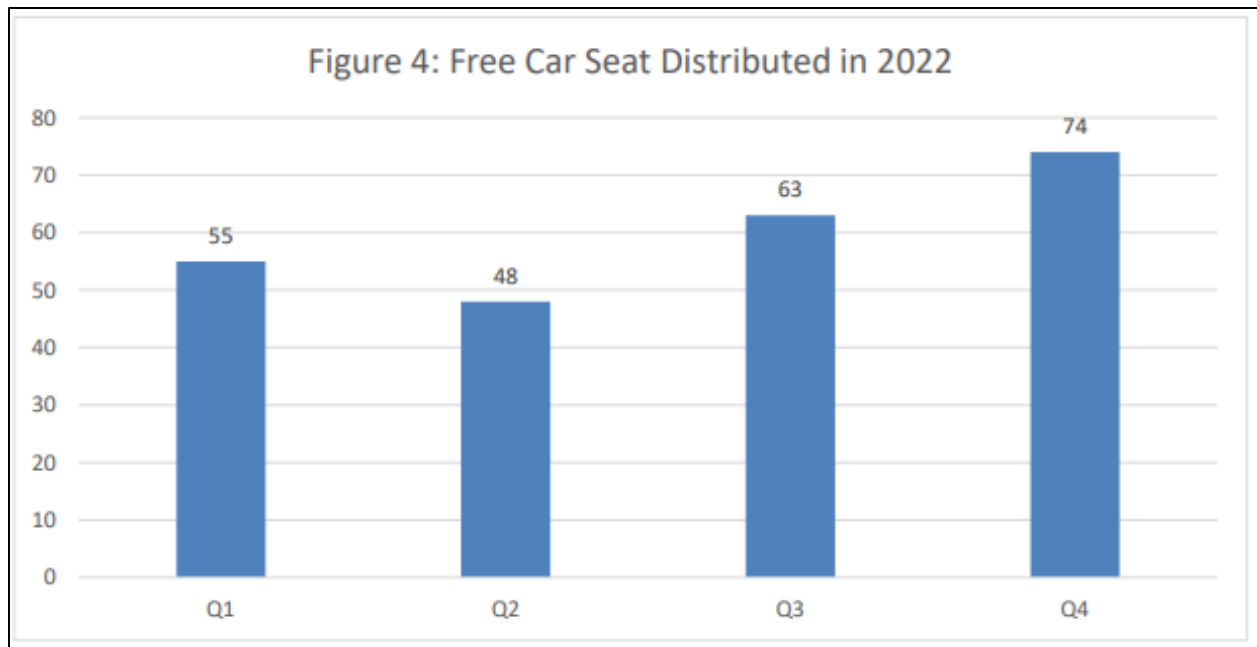


Car Seat Program

At the beginning of 2022, the Car Seat Program made some adjustments to cope with some lingering Covid-19 pandemic affects. However, by the middle of the year, the Program began operating at pre-pandemic levels. Car seat checks began operating on a regular schedule at set locations, virtual appointments continued to be part of our repertoire, and outreach events resumed. Graphs containing stats for the car seat program are featured on the following pages.







Outreach to the elderly/disabled

MCFRS continues to focus resources toward reducing the likelihood and the impact of fires on the senior community. This has been a multi-faced and sustained program since 2008. Our research clearly shows that environment and technology are not the only determinants of successfully surviving a fire, but that human behavior plays a dominant role and the education component and home safety visits are critical to saving lives. Behavioral reactions to fire, to fire detection and to fire alarms can often mean the difference between who dies and who survives. Behavioral models that incorporate early detection and planned and practiced escape can measurably improve survivability. However, programs that show the most promise to integrate both installing alarms properly in homes combined with a strong educational component and is what has made our program so successful. Our data confirms that smoke alarm installation programs work, especially when combined with home safety visits that provide “on the scene” education and awareness of their proper use and maintenance. Elderly residents are often missed with traditional fire safety education and often unable to travel to group presentations and by targeting the most vulnerable, we are reducing the risk to both residents and firefighters.

6. INITIATIVES/STRATEGIES (2023)

- Improving messaging to promote action and change.
- Continued training of MCFRS recruits in USFA’s “Introduction to Strategic Community Risk Reduction” course. Propose inclusion of CRR classes and the completion of the USFA’s “Introduction to Strategic Community Risk Reduction” course as part of the promotional process.

- CRR received a \$2000 grant from Safe Kids Worldwide to provide education related to water safety. That project will begin in the spring 2023.
- CRR submitted a proposal for the Toyota “Buckle Up Grant” to provide car seats for families in need.
- Draft recommendation for the establishment of a department “Fire Fatality Review Team” to review significant injuries and fire fatalities with the goal to take a deeper and collective look and analysis into the circumstances of incidents and any contributing factors to engineer effective CRR strategies.
- Increase partnering with places of worship and other community-based programs that appeal to large numbers of non-English speakers. Following COVID, many programs are still paused.
- Pitch concept to Operations to provide monthly “CRR Matters” featuring educational and trending safety topics during line-up in an effort to enhance and increase CRR knowledge and awareness.
- Increase collaboration with our partners to identify funding streams for car seat purchases.
- Update the car seat website to make it more user friendly, provide more up-to-date information, and provide links to other sites/resources.
- The FY24 recommended budget includes funding for two additional CRR specialist positions. If the budget passes the Council, this will increase the department’s capacity to deliver and expand targeted prevention and education services focused on the most vulnerable: the very young and the elderly.
- Work with the County’s Equity Center and Linkages to Learning school-based programs to increase the number of bilingual community presentations and distribution of translated materials on key safety topics to program participants.
- Continue to enhance and increase the number of bilingual CRR and fire safety and injury prevention campaigns and initiatives.
- Develop a fire safety strategy and focus of CRR outreach and work on the 75 non-sprinklered, residential high rises in Montgomery County.
- Develop marketing strategy to promote lithium battery, e-bike and e-scooter safety programs in the County.
- Continue to build out Senior Outreach programs to include increased virtual presentations to large audiences including AARP, senior multi-family housing, Adult Protective Services staff, HHS social workers, Civic Association and Homeowner meetings, and others that serve older adults.

FESSAM CATEGORY 5 PROGRAM APPRAISAL DOMESTIC PREPAREDNESS

1. CRITERION & PROGRAM AREA

5D – Domestic Preparedness

2. PERIOD OF APPRAISAL

CY2022

3. PROGRAM AREA MISSION STATEMENT

The Montgomery County Fire & Rescue Service (MCFRS) strives to maintain operational readiness at all times for an all-hazards mission and response capability and seeks and sustains tactical and strategic partnerships with other local, regional, state, and federal agencies and private sector organizations to enhance our capabilities to prevent, respond to, and mitigate emergency incidents.

4. PROGRAM AREA RESOURCES & INPUTS

MCFRS is part of the County's Emergency Management Group, coordinated by the Montgomery County Office of Emergency Management & Homeland Security (OEMHS). OEMHS maintains the County's Emergency Operations Plan, which establishes the procedures for mobilizing resources and communicating with personnel to mitigate the effects of incidents that endanger an organization, a community, or government, as a whole.

5. PROGRAM AREA OUTPUT, OUTCOMES & IMPACT

There were three large incidents in CY22 -- two building explosions, and one airplane trapped in high voltage transmission lines 100' above the ground -- that tested the ability of County agencies to coordinate actions during an emerging crisis. The review of these incidents led to changes in how County agencies coordinate activities during "whole of County" responses. FRS worked with OEMHS to streamline coordination on emergency incidents based on lessons learned from those major incidents. We:

- Created a Microsoft Teams channel with police, fire, OEMHS and others to share incident information for large scale incidents in real time.
- Mutually agreed on the initial set of five objectives that will guide the first 30-60 minutes of large-scale incident coordination.
- Developed a process to integrate OEMHS personnel into the role of incident documentation
- Agreed to let OEMHS run all after-action hotwashes for large scale events.

MCFRS strives to be a learning organization, and in accordance with IRP Appendix T, conducts after action reviews of large incidents to evaluate performance and identify areas of improvement.

These AAR's are available for review by all members. Additionally, the Training Academy uses their educational outreach programs (Boss Talks, Challenges in the Streets, From the Command Post) to further disseminate lessons-learned information to all members, so that everyone can learn from firsthand experience and these lessons can be integrated into future operations. The Academy's educational programs are invaluable to continued learning and improvement.

6. INITIATIVES/STRATEGIES (2023)

- Continue to work with OEMHS on the development of methods to improve crisis information flow
- MCFRS will support the OEMHS update of the Emergency Operations plan in CY23.
- MCFRS will be revisiting and updating the Continuity of Operations plan in CY23.

7. REFERENCES

[Gaithersburg Plane Crash From the Command Post](#)

Lyttonsville Significant Incident Review (not for public release)

[Quince Orchard Building Explosion Boss Talk](#)

FESSAM CATEGORY 5 PROGRAM APPRAISAL FIRE SUPPRESSION

1. CRITERION & PROGRAM AREA

5E - Fire Suppression

2. PERIOD OF APPRAISAL

CY2022

3. PROGRAM AREA MISSION STATEMENT

The mission of the Montgomery County Fire and Rescue Service is to protect lives, property and the environment with comprehensive risk reduction programs and safe and effective emergency response provided by highly skilled career and volunteer service providers representing the County's diverse population.

4. PROGRAM AREA RESOURCES & INPUTS

MCFRS' existing structural firefighting force is qualified in the all-hazards mission of the department. In accordance with [Montgomery County Executive Regulation 16-05](#), there are 1,199 active career and 779 active volunteers certified on the Integrated Emergency Command Structure (IECS) [list](#).¹

In 2022, MCFRS graduated two recruit classes, and 59 career personnel joined the ranks of the department.

For more specifics and organizational details:

- [MCFRS Organizational Chart](#)
- [MCFRS Division of Operations](#)
- [2023 Battalion Roster](#)

Firefighting personnel respond from 37 fire/rescue stations within Montgomery County. There are also five federal fire departments that provide automatic aid in the County.

Frontline apparatus staffing is guided by [Policy 25-08AMII](#), and includes the following:

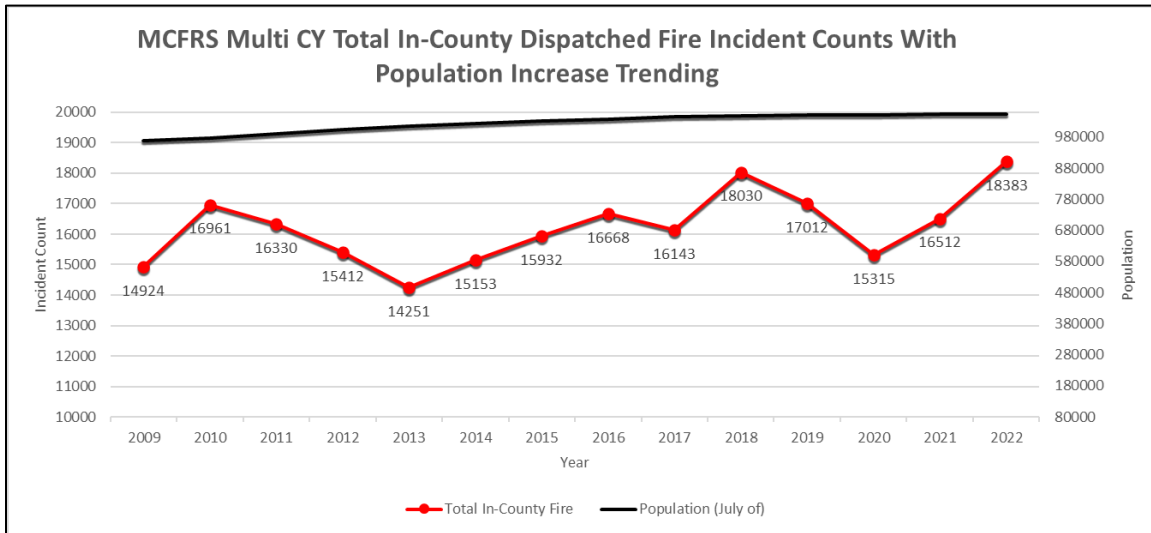
- 35 paramedic engines
- 15 aerial ladder trucks
- 6 rescue squads (heavy extrication capable)
- 13 brush trucks
- 4 brush engines
- 8 tankers

¹ As of 1/6/2023.

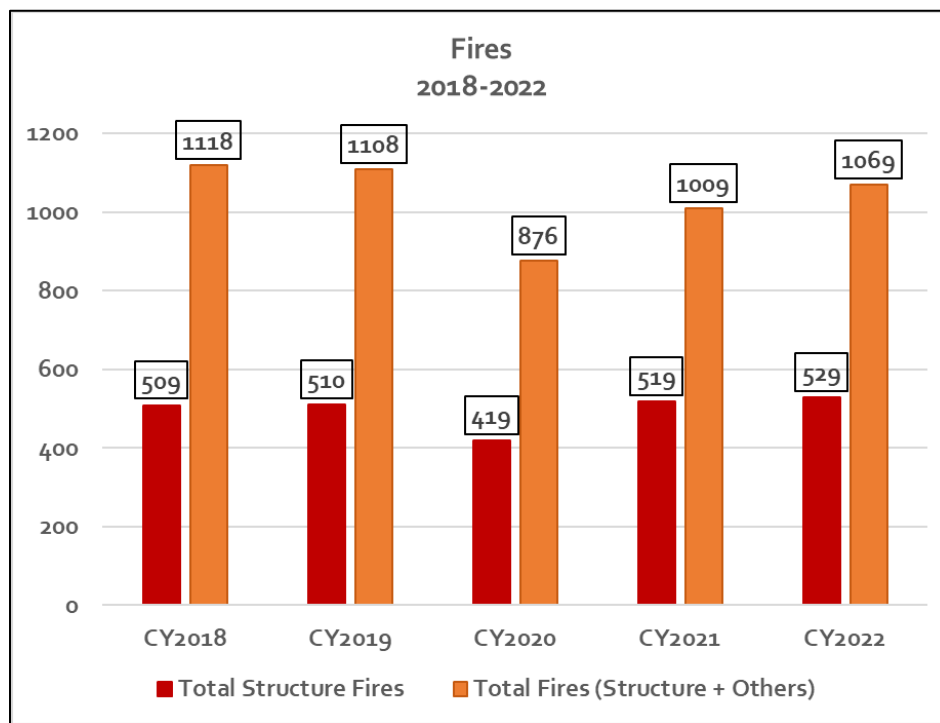
5. PROGRAM AREA OUTPUTS, OUTCOMES, & IMPACT

MCFRS delivers exceptional fire suppression services throughout the County, and when providing mutual aid to our neighboring partners.

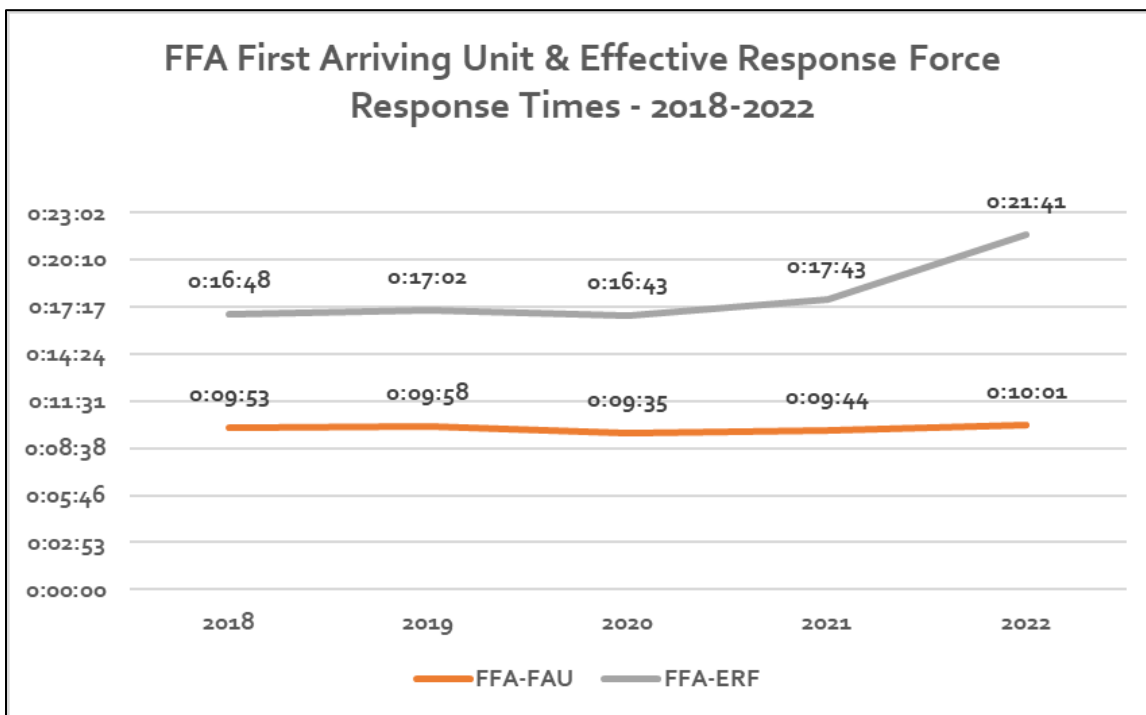
In 2022, there were 18,383 dispatched fire calls (call type group 1) in Montgomery County, an 11.3% increase over CY2021.



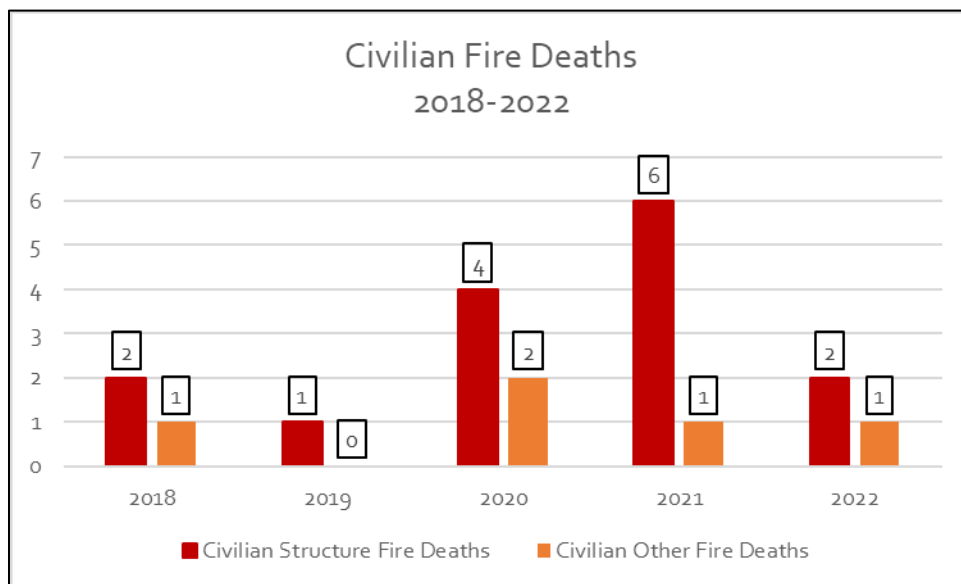
There were 529 structure fires and 1,069 total fires (includes vehicles, dumpsters, brush/grass, etc.), 1.9% and 6% increases, respectively.



Countywide, we showed slight improvements in phone to dispatch and turnout times, but 90th percentile travel times ticked upwards, increasing first arriving unit and effective response force times.



There were three fire-related fatalities in 2022, including one intentional death.



More fire-related statistics can be found on the [Accreditation SharePoint site](#), including a newly developed map that highlights NFIRS 111 structure fires throughout the County since 2021.

Key Accomplishments

- The PSTA helped facilitate several important discussions through Boss Talk programming following some significant structure fires, including the [Glenmont Circle fire](#), [Robey Road independent living facility fire](#), and the [Quince Orchard Boulevard building explosion](#).
- Instituted a rural water supply process monitoring program following performance testing on the use of 4" large diameter hose in relay pumping operations. A [Challenges in the Street](#) covered relay pumping considerations.
- Conducted additional education of members on the challenges of battery emergencies, including a [Challenges in the Street](#) episode.
- Instituted a process whereby FRS can record and track "saves" accomplished by personnel during structure fire assignments. Between September 1, 2022, and December 31, 2022, five saves were documented.

6. INITIATIVES/STRATEGIES (2023)

During the Chief Officers' briefing, the following were outlined as the focus in 2023:

- Improve community impact
- Increase organizational resilience
- Codify our risk management approach

FESSAM CATEGORY 5 PROGRAM APPRAISAL FIRE & EXPLOSIVES INVESTIGATIONS

1. CRITERION & PROGRAM AREA

5C - Fire Investigation, Origin and Cause

2. PERIOD OF APPRAISAL

CY 2022

3. PROGRAM AREA MISSION STATEMENT

The mission of the Fire & Explosive Investigations Unit/Bomb Squad is to protect lives and property by way of determining and relaying information regarding the causes of fires and explosions, arresting and prosecuting those responsible for criminal acts related to fires and explosions and an immediate and effective response to mitigate incidents involving improvised chemical, biological, radiological, nuclear, incendiary and explosive devices, military ordnance and improvised explosives labs.

4. PROGRAM AREA RESOURCES & INPUTS

FEI continued to have two vacant positions in the unit.

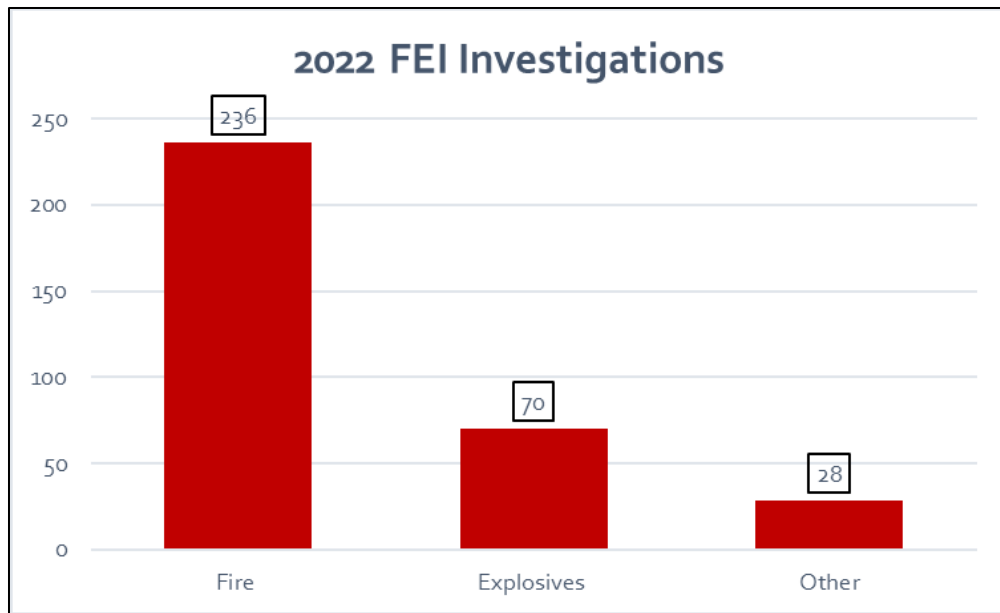
In 2022, a review of legislation impacting FEI resulted in the creation of a civilian Program Manager position to oversee the unit. The new program manager is responsible for evaluating all aspects of the unit, including staffing levels and deployment, and revision of policies and procedures.

Policy revisions began in 2022, and will continue through 2023, as the department ensures that all written directives are in compliance with current laws and regulations related to police accountability, and consistent with the MCFRS mission and the IAFF collective bargaining agreement.

Personnel continue to enhance skills and capabilities through advanced fire origin and cause investigation classes, including those dealing with the newest edition of NFPA 921, Guide for Fire and Explosion Investigations, and NFPA 1033, Standard for Professional Qualifications for Fire Investigator. Bomb technicians' advanced training courses were in military ordnance, advanced disposal techniques, and other render safe procedures.

5. PROGRAM OUTPUT, OUTCOMES & IMPACT

FEI investigated 334 incidents in 2022, including 236 fires and 70 explosive-related incidents. Investigations determined that 70 fires were intentionally set in 2022. Investigators made 19 arrests in connection with those fires. An estimated \$992k in damages/loss was recorded in the fires that were investigated.



There was one fatality (suicide) associated with an intentionally set fire. There were two other fire-related fatalities in 2022.

6. INITIATIVES/STRATEGIES (2023)

The primary focus of FEI in 2023 is addressing the state/county mandates related to police reform. Under the guidance of the new unit manager, FEI will revisit its policies and procedures, notifications and reporting, oversight, disciplinary processes, and use of body worn cameras, to ensure compliance with all new regulations. Additionally, FEI plans to send up to four people through the Montgomery County Police Academy to address staffing concerns.

**FESSAM CATEGORY 5
PROGRAM APPRAISAL
EMERGENCY MEDICAL & INTEGRATED
HEALTHCARE SERVICES**

1. CRITERION & PROGRAM AREA:

5F - Emergency Medical Services

2. PERIOD OF APPRAISAL

CY2022

3. PROGRAM AREA MISSION STATEMENT

“It is our mission to create a just culture within emergency medical and integrated healthcare services that fosters and supports data driven quality improvement, high quality patient care, and accountability to our internal and external regulatory responsibilities.”

4. PROGRAM AREA RESOURCES & INPUTS

Personnel:

The EMIHS Section (the Section) is overseen by:

- (1) uniformed Assistant Chief (AC)
- (2) Battalion Chiefs (BCs) ((1) Operations Battalion Chief and (1) Quality Management Battalion Chief)
- (1) full-time civilian Mobile Integrated Health (MIH) Program Manager
- (1) full time contracted civilian Medical Director.

Subordinate administrative staff includes:

- (2) Captains (Quality Assurance [QA] and Quality Improvement [QI] Officers)
- Full-time MIH data analyst
- Full-time Office Services Coordinator
- (7) part-time (collateral duty/overtime) process owners for the following processes:
 - ACS/STEMI
 - Medical cardiac arrest
 - Stroke
 - ALS to BLS Downgrade
 - Intubation
 - Point of care ultrasound
 - Patient care documentation and recordation
- (2) Montgomery County Department of Health and Human Services employees are embedded within MCFRS as part of the MIH team.

During CY22 the EMS Section added (1) Quality Management Battalion Chief, three (3) EMS Duty Officers (one (1) per shift), EMS700, and a full-time Office Service Coordinator.

In addition, seven (7) Captains and three (3) Lieutenants serve as EMS Duty Officers across MCFRS' three operational shifts – two (2) Captains and one (1) Lieutenant per shift and one (1) Captain in “relief.” These officers liaise with our local hospitals and field personnel to facilitate effective EMS delivery. In addition, they provide critical, on-scene, infrastructural support relative to our QI/QA initiatives, especially on high acuity and multiple patient incidents.

SOPs and Protocols

Published Fire Chief General Orders

- [22-04 Leave-Behind Naloxone & Urgent Follow-Up Program](#)
- [22-03 Paramedic Chase Unit \(Chase Car\) Staffing](#)

Published Clinical Practice Guidelines

- [2022-05 Vector Change \(VC\) Defibrillation in Shock-Refractory VF](#)
- [2022-04 Discontinuation of Ammonia Inhalants](#)
- [2022-03 Albuterol by BLS Clinicians](#)
- [2022-02 Continuous ETCO2 Monitoring for Advanced Airways](#)
- [2022-01 Advanced Airway Management](#)

Maryland Medical Protocol Changes

- Ketamine added to TCP and Sync Cardioversion for pain/sedation
- Droperidol replaced haloperidol for the treatment of moderate agitation
- The indications for sodium bicarbonate and calcium chloride were limited within cardiac arrest resuscitation
- Tranexamic Acid was added for the treatment of traumatic hemorrhagic shock
- Added supraglottic airways for patients of all ages
- Induced hypothermia treatment was removed
- Added a general care protocol to treat critically unstable patients

Training and Certifications:

- Published twenty-two (22) “5 Minute drills” for station personnel
- Both the QA and QI Officers, per Maryland regulation (COMAR Title 30) have completed the *Maryland Institute of Emergency Medical Services Systems (MIEMSS) QA Officer course*
- All uniformed staff and the Medical Director are members of the National Association of EMS Physicians

5. PROGRAM AREA OUTPUT, OUTCOMES & IMPACT

All aspects of emergency medicine are surveilled and measured utilizing many dynamic data sources and reports as its primary method for determining the effectiveness of the EMIHS Section and identifying variances. The data is aggregated and presented within Power BI. This is a view of the published [EMIHS Dashboard \(2023-01\)](#), which is reviewed monthly by the EMIHS Section and MCFRS leadership.

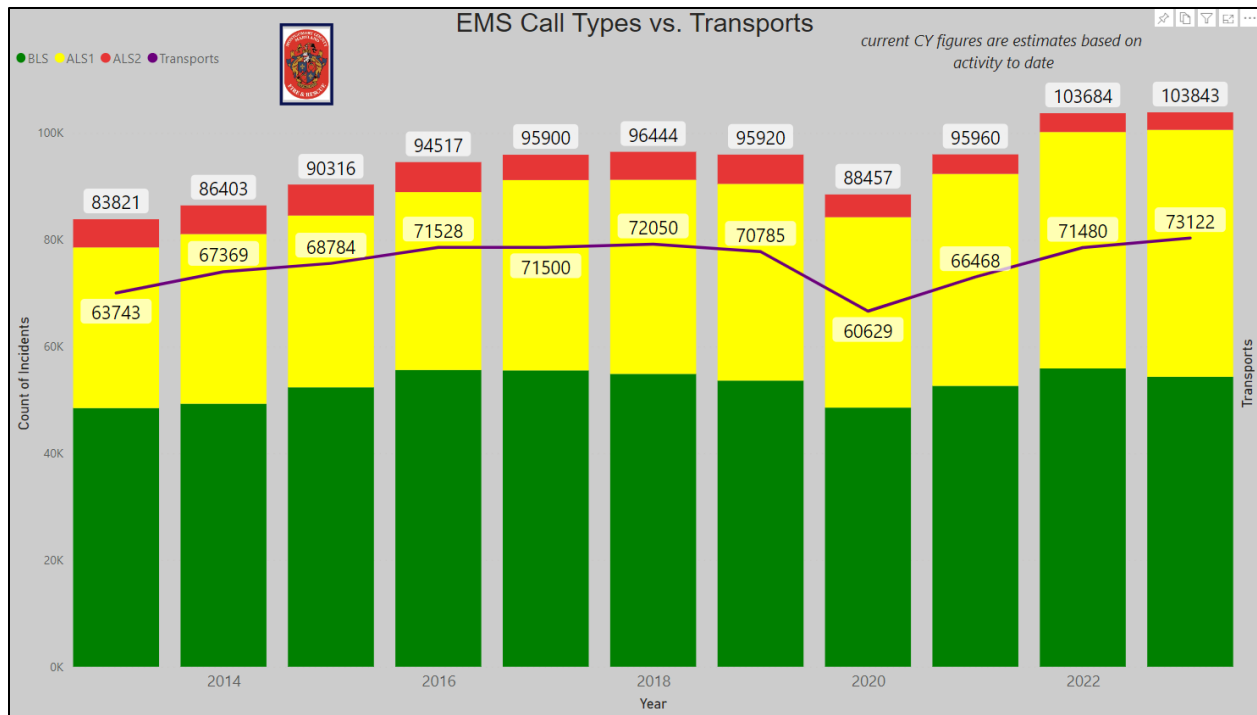


Figure 1 Dispatches and Transports by Year. CY23 is an estimate based on YTD totals.

Both the total EMS dispatches for CY2022 and the total number of patients transported increased since returning to normal (post-COVID) levels. Contributing factors for the increase in transports may include:

- Decrease in patient's reluctance to utilize Emergency Departments
- An agnostic attitude towards long waits in Emergency Departments

During CY2022, wait times and turnover times at hospitals continue to cause strain on EMS resources. MCFRS added a clinical disposition officer to monitor hospital status, designate receiving hospital destinations, and provide clinical and operational oversight of the EMS system.

The monthly QA/QI (patient centric) dashboards for the EMIHS Section can be found [here](#). This is a monthly snapshot of the live dashboards found within MCFRS Power BI sites and provides a mechanism for section evaluation and trend identification that may be affecting service delivery.

The annual operational centric data relating to the analyzation of unit call volume, unit response, 1st arriving paramedic total response time, etc. can be found [here](#). This is data measured and/or calculated within the last current calendar year.

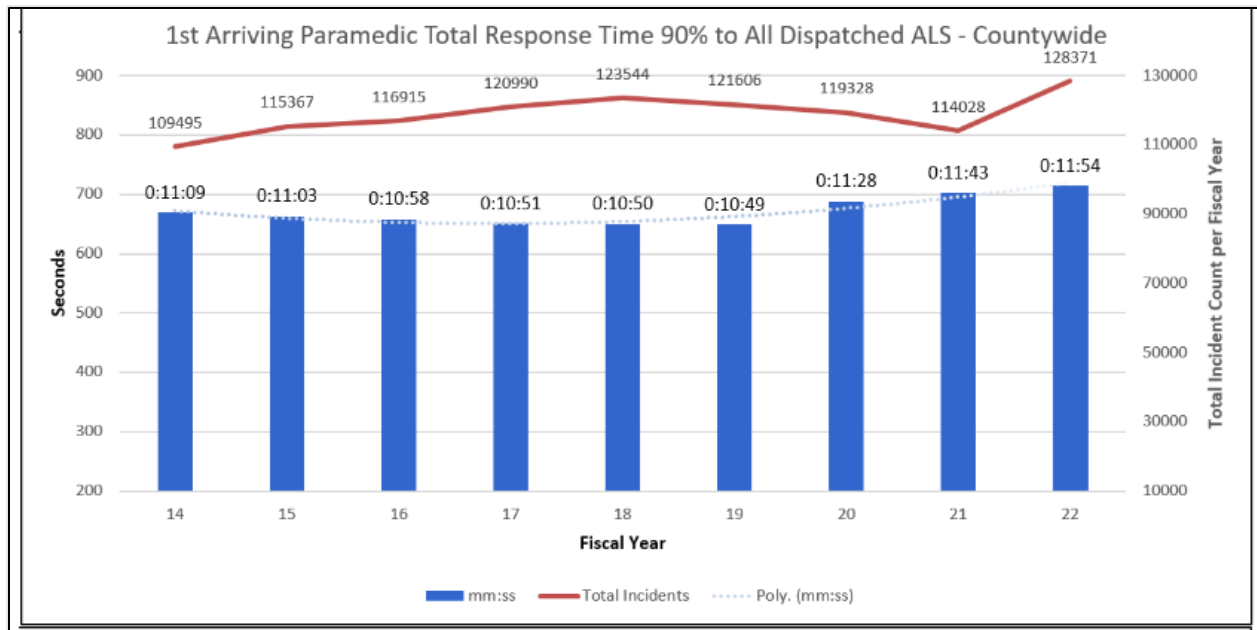


Figure 2 1st Arriving Paramedic Total Response Time - Countywide

The EMIHS Section continues to monitor, assess, and provide interventions, when necessary, to **many** *Operational* and *Quality Management* processes and performance measures to sustain the highest level of performance possible while being pioneers to the latest research of clinical intervention, technology, and pre-hospital advancement. Our operational data focuses on many traditional and on-traditional fire department performance indicators while our quality management data encompasses more healthcare/patient centric performance indicators which are utilized between both internal and external stakeholders.

Observed Trends:

- CY2022 EMS call volume has surpassed pre-pandemic levels and is projected to continue to increase in CY2023.
- CY2022 data shows that the outcomes associated with our return of spontaneous circulation (ROSC) rates and the number of CPC 1 and 2 patients have rebounded to normal ranges post-pandemic.
- Within CY2022, MCFRS noted sustained and prolonged wait times to offload patients within the local emergency departments. Since the implementation of EMS 700 on October 9th, 2022, MCFRS has observed a marked downward trend in the median drop time for our patients and a meaningful reduction in EMS incident cycle time.
- MCFRS has noted an increase in performance with our first pass success of video laryngoscopy after implementing a Quality Improvement Intervention (as described below).
- In CY2020, MCFRS instituted “cold” responses (no lights or sirens) for some low acuity dispatches. As we continue to monitor outcomes and refine call type protocols, we increased the number of cold responses from 8333 in CY2021 to 9718 in CY2022.

- Customer Service: In CY2020, EMIHS began texting a customer satisfaction survey to transported patients to get feedback on service delivery. Response rates and performance ratings were consistent throughout CY2022 (see figure 3).

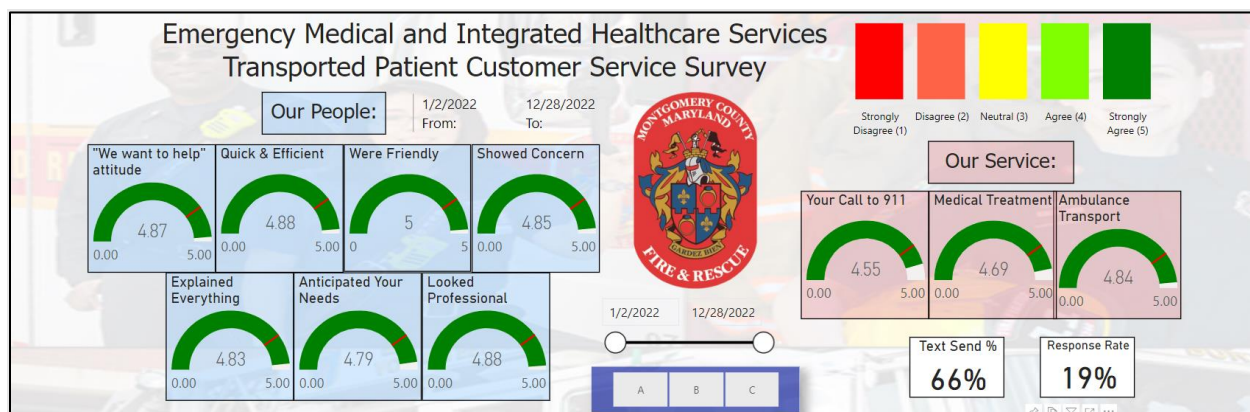


Figure 3 EMIHS Transported Patient Customer Service Survey

- With the addition of an additional EMS Duty Officer (EMS702) on October 9th, 2022, MCFRS has decreased EMS Supervisor response time, ensured an earlier arrival of an EMS supervisor on cardiac arrests, and realigned ED liaison responsibilities. Significant gaps still remain in the ALS and BLS supervision of operational personnel:
 - There are now three on-duty EMS supervisors to oversee 100,000 annual patient encounters (~300 per day).
 - Each responsible for over 150 square miles

These gaps will continue to lessen if a fourth EMSDO is approved in the operating budget. Optimal geographic and response coverage is estimated at close to 5 EMSDOs county-wide.

- In CY22, MCFRS continued a program to transport patients to alternative destinations (i.e., urgent care centers) and to support telehealth facilitated by ambulance personnel. Though we did see a slight increase in the number of patients who participated, it remained a low percentage of total patient contacts:
 - CY2022 Alternative destination patients: 52
 - CY2022 Telehealth patients who were not transported to a hospital: 32
- MCFRS and USACS (the telehealth physician provider) collaboratively decided to discontinue the telehealth program in its current form. It is the hope of MCFRS EMIHS to rework the fundamental structure of that program to allow for a large remote call-center to provide the physician services rather than local ED physicians who are on-call. This iteration will involve protocol changes at the state level that are cumbersome and labor intensive; however, we believe they can be accomplished in the current protocol with hopeful implementation by July 2024.

Outcomes

The part-time (0700-2300 each day) establishment of a Clinical Disposition Officer (EMS 700) provides clinical oversight on *all* EMS calls, not just the small fraction on which an EMSDO is physically present. This improves not just the decision making for the hospital destination but also for the care that is provided on scene and while in transport. Examples include directing trauma upgrades, referrals to Children's, stroke care, downgrade oversight, and encouraging the utilization of alternative destinations. Staffing this position with a credentialed EMS Duty Officer continues to be effective as it provides supervisory oversight to every incident and continues to improve overall quality of care.

During the last year, the EMIHS Section continued to measure, assess, and modify our approach to Advanced Airway Management with the goal of increasing the first pass attempt rates. A process owner was assigned to conduct 100% case reviews of all intubations performed with the AirTraQ, a non-displacement, channeled intubation device that records video. This review process involves annotating procedural videos and sharing that performance feedback with the ALS clinician. This process produced a measurable improvement that was monitored by a [PowerBI dashboard](#).

Since MCFRS engages in regular and ongoing appraisals of its EMIHS section, another recent quality improvement intervention was applied to our existing *ALS to BLS Downgrade Process* where systemic compliance was calculated and noted to be suboptimal. A timeline and plan of action was developed by reviewing the aggregate data and applying the *Plan, Do, Study, Act* quality improvement model. With this intervention, the EMIHS Section is expecting to see improvement within the *ALS to BLS Downgrade Process*, as defined by Fire Chief's General Order 20-07, found [here](#).

The EMIHS Quality Management Battalion Chief oversees the daily operations of system surveillance and feedback. MCFRS self-monitors and assesses systemic quality performance as it pertains to the nexus of medicine using the EMS Quality Management Plan as its guide. These efforts include real time surveillance using Firstwatch triggers, chart review of 100% of critical processes using process owners and the Firstwatch Firstpass system, customer satisfaction surveys, and a myriad of other inputs. In CY2022, the Quality Assurance Office handled 479 total inquiries, of which, five (5) were considered complex as defined in the QM plan.

The Mobile Integrated Health unit continues to process a high number of requests for service and refer patients to partner agencies. Because of this unit's success, two new Mobile Integrated Health (MIH) paramedic positions were added in the FY23 budget process; hiring for these positions should occur in the last quarter of FY23.

Impact

Montgomery County Fire and Rescue Service (MCFRS) is charged with providing emergency medical services within the borders of Montgomery County. The EMIHS Section continues to expand its Operational and Quality Management reach to measure and assess the outcomes and results of performance and processes to ensure that it is meeting the expectations of internal and external stakeholders.

MCFRS twice a year hosts an EMIHS Provider Recognition Ceremony to acknowledge outstanding achievements in patient care and outcomes. It is an opportunity for clinicians to meet

and interact with patients who have had significant events including cardiac arrest patients who achieved a neurologically intact discharge from the hospital. These emotional ceremonies are exceptionally gratifying for these patients, our providers and the staff who work behind the scenes to create an environment where these outcomes are possible.

EMIHS staff published one full manuscript in *Prehospital Emergency Care* concerning the work done around the transportation disposition officer (EMS700). The article, entitled “An EMS Transport Destination Officer is Associated with Reductions in Simultaneous Emergency Department Arrivals” appeared in the September 2022 edition and is currently available online ahead of print.²

Staff also published and presented two abstracts at the 2022 National Association of EMS Physicians conference in San Diego CA. These two abstracts, “Comparison of COVID-19 Test Positivity Rates in Prehospital Termination of Resuscitation Patients and the Community at Large” and “An evaluation of time intervals to complete two time-critical tasks in prehospital cardiac arrest resuscitation during the COVID-19 pandemic” were both analyses of work done during the COVID-19 pandemic.³ At this same conference, staff presented the results of experience with the CMMI Emergency Triage, Treatment, and Transport Program (ET3).

Additionally, EMIHS staff partnered with a physician from the Ohio State University to publish and present an abstract at the American Heart Association Resuscitation Science Symposium in Chicago IL. This abstract entitled “Disparities Between Reported and Actual First Pass Discovered After Video Review of Prehospital Intubations” shared knowledge we had discovered through our improvement efforts regarding video laryngoscopy and endotracheal intubation.⁴

The QM Battalion Chief Spoke at various conferences locally, regionally and nationally throughout the year including two command officer development initiative sessions, the 2022 Adventist Healthcare Research and Ethics Conference, and the 2022 National Association of EMS Physicians Conference. At the NAEMSP conference, he was joined by the EMIHS Operations Battalion Chief and the MCFRS Medical Director in speaking.

The Operations Battalion Chief and the Medical Director co-presented at a plenary session at the Maryland State EMS Care conference in May 2022. The two also co-presented the keynote address at the Pennsylvania State EMS Training Blitz hosted by Cranberry Township, PA in August 2022. The Medical Director gave three lectures at the Virginia State EMS Conference in Norfolk, VA in November 2022.

² Burns TA, Kaufman B, Stone RM. An EMS Transport Destination Officer is Associated with Reductions in Simultaneous Emergency Department Arrivals. *Prehosp Emerg Care*. 2022 Sep 2:1-5. doi: 10.1080/10903127.2022.2107126. Epub ahead of print. PMID: 35894867.

³ (2022) Research Abstracts for the 2022 NAEMSP Annual Meeting, *Prehospital Emergency Care*, 26:1, 108-163, DOI: 10.1080/10903127.2021.1995553

⁴ TIMOTHY A BURNS, Henry Wang, Roger Stone and Ben Kaufman. Disparities Between Reported And Actual First Pass Discovered After Video Review Of Prehospital Intubations. *Circulation*. 2022;146:A310. https://www.ahajournals.org/doi/10.1161/circ.146.suppl_1.310

Members of the EMS Section continue to participate at MIEMSS committee meetings and lead the discussion on state protocol changes. MCFRS has a continued national presence by sharing data, presenting research, and innovation. The Medical Director is an active participant with a national consortium of EMS Medical Directors called the Eagles. Many other jurisdictions look to MCFRS for initiative and strategy. For example, departments in Milwaukee, Seattle, and Fort Worth are inquisitive about the data and success surrounding our *ALS to BLS Downgrade Process*.

6. INITIATIVES/STRATEGIES (2023)

- *IV pump initiative*: One EMIHS goal for FY23 is to deploy one IV pump with every set of ALS gear and to mandate that all IV infusions, including fluid boluses, are administered via pump. The primary reason for the deployment is to enable us to expand our formulary to include norepinephrine in the setting of return of spontaneous circulation after out-of-hospital cardiac arrest. There is a growing evidence base that suggests that norepinephrine is superior to epinephrine, our current vasopressor in these situations. Improving the neurologically intact discharge (walking, talking, fully functional) of patients on whom we regain pulses is the overarching goal of the change. Additionally, we will be soon expanding our formulary to include IV nitroglycerin for certain respiratory distress patients. This medication can be administered in multiple small doses without a pump but it can also be administered as a continuous infusion via an IV pump. Using the continuous infusion will allow our clinicians more control of the administration based on the patient's needs. The process of "titration to effect" allows them to start at one level, gauge the effects, and adjust how much medication the patient is receiving up or down. The medical evidence suggests that minority groups are overrepresented in the patients who suffer from this disease process compared to the population at large. The outsized impact of this disease process on potentially vulnerable populations allows us to implement a therapy that will have a proportionate impact on their health status outcomes. Finally, our current method of administration of IV infusions involves our clinicians counting IV drops per second and performing a series of complex mathematical calculations to deliver the medication at the correct rate. Additionally, it also relies on the clinician to stop the medication when the desired dose has been administered. In the contemporary EMS environment where our clinicians may be operating by themselves as the only advanced life support provider they must simultaneously monitor the patient for the desired effect or changes in status, move the patient, communicate with the hospital and complete a litany of other tasks. The IV pump will function as a set-it-and-forget-it solution allowing them to focus on other demands while the pump continues to deliver the right dose of the medication at the right rate and stop when complete. This functionality reduces the cognitive workload of the clinician and eliminates error points in patient care, improving quality and increasing value to our patients and the organization.

Ongoing HHS partnership

FESSAM CATEGORY 5 PROGRAM APPRAISAL TECHNICAL RESCUE

1. CRITERION & PROGRAM AREA

5G - Technical Rescue

2. PERIOD OF APPRAISAL

CY 2022

3. PROGRAM AREA MISSION STATEMENT

The mission of the Montgomery County Fire and Rescue Service Special Operations Section is to enhance and expand upon the capabilities of Montgomery County Fire and Rescue Service by providing highly trained and specialized response, management, origin and cause determination, and logistical capabilities for any high risk/low frequency incident or event.

4. PROGRAM AREA RESOURCES & INPUTS

Personnel

The number of tech rescue team members and paramedics, swiftwater boat crew, operations level boat operators and crew, and utility task vehicle drivers for CY2022.

Technical Rescue Team Officers (TRTo) - 20 – decrease from CY21

Technical Rescue Team Members (TRTm) – 101 – increase from CY21

Technical Rescue Team Paramedic (TRTp) - 8 – decrease from CY21

Technical Rescue Team Trainee (TRT-tr) - 21 – increase from CY21

Swift Water Task Force Leaders - 1 – decrease from CY21

Swift Water Officers - 10 – same as CY21

Swift Water Boat Operators (SWBO) - 28 – same as CY21

Swift Water Boat Crew Members (SWBC) - 72 – decrease from CY21

Swift Water Trainee (SWTR-tr) -25 – increase from CY21

Operations Level Boat Operators - 142– increase from CY21

Operations Level Boat Crew Members - 213– decrease from CY21

Utility Task Vehicle Driver/Operators– 185– increase from CY21

The number of Technical Rescue Team (TRT) personnel for 2022 was not a significant increase. Fifteen members resigned, most of which were attributed to retirement and/or promotion within the department and fifteen members joined the team in their place. Statistically, this is an even trade; however, many of the resignations had many years of service to TRT. The fifteen members that joined the team will have one to two years of training classes until they can become functioning members of the TRT. Operationally, this gap places TRT slightly behind its position at the same time in the previous year.

Equipment & other resources

The SWRT has completed the demo and purchase of the Garmin Side Scan Sonar system. This system has been used for several water related incidents in which a victim has drowned and remained submerged. It allows for the SWRT personnel to reduce victim recovery times.

Additionally, SWRT has reviewed and updated the SWRT Standard Operating Guideline 21-02: Guidelines for Potomac River Levels Operations/Training. This process concluded in November of 2022.

SWRT continued to focus training initiatives to increase the number of available and trained swift water boat operators as well as a public outreach initiative to promote water safety and reduce incidents occurring on the river.

TRT has also implemented several new pieces of equipment in 2022. These include:

- Training and implantation of the Leader Seismic Listen System;
- Conversion of the trench rescue panels to the recommended construction including laminated veneer lumber (LVL) strong backs;
- Two 9” battery-operated rotary saws;
- Two 14” battery-operated rotary saws;
- Milwaukee Power Fuel System to support the battery-operated saws;
- Two CMC patient packaging systems with victim harness;
- Three battery-operated framing nailers;
- Additional of a Basic Life Support (BLS) gear bag to standard equipment inventory.

TRT offered several training courses, some in conjunction with the Public Safety Training Academy, these included:

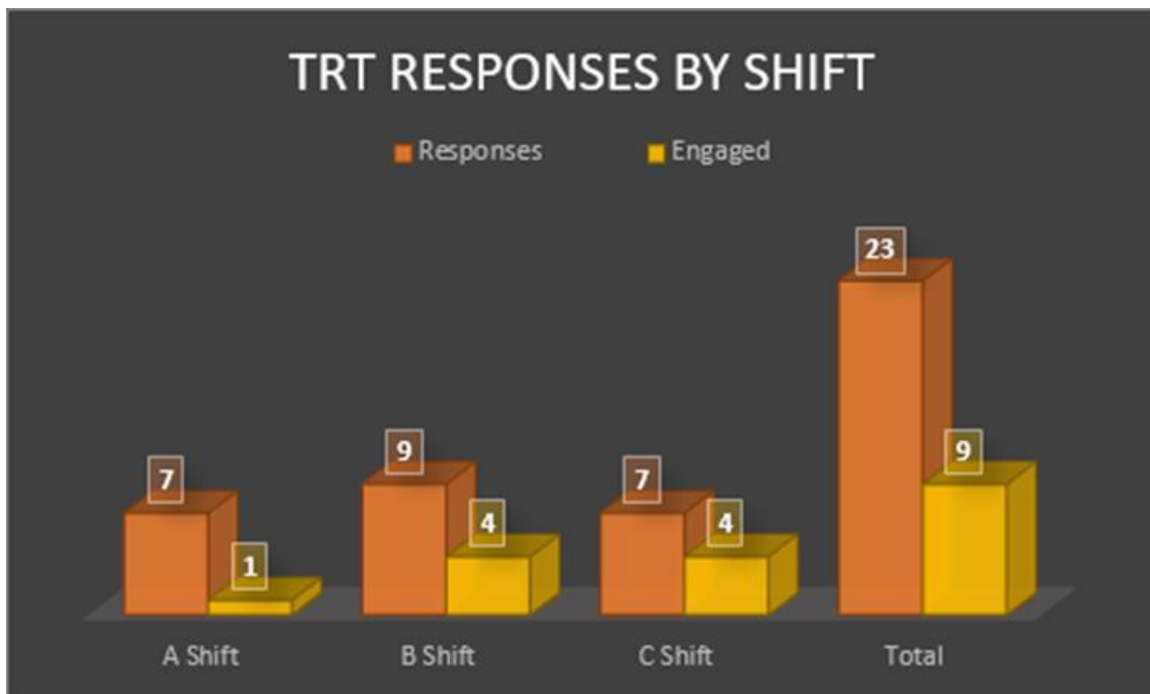
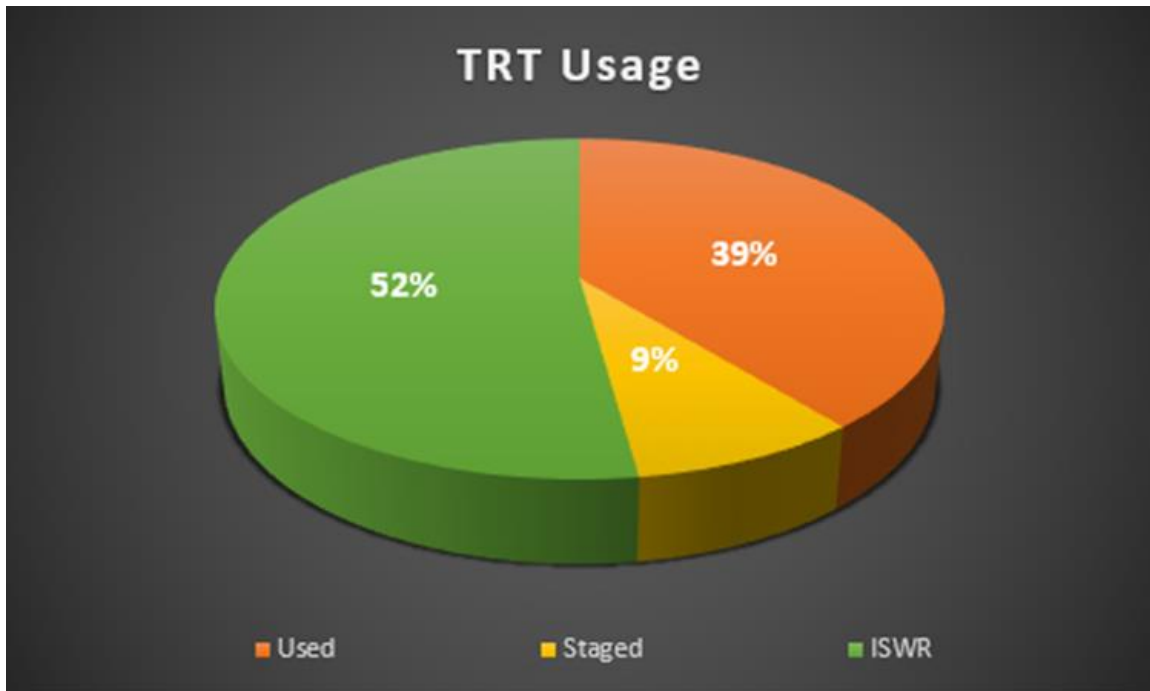
- Structural Collapse Specialist (90 hours) – grant funded
- Rope Rescue Technician (54 hours)
- Confined Space Rescue Technician (30 hours)
- Rope Access for the Fire Service (16 hours)
- Train-the-Trainer Trench Update (8-hours)

TRT implemented the following policies/procedures in 2022:

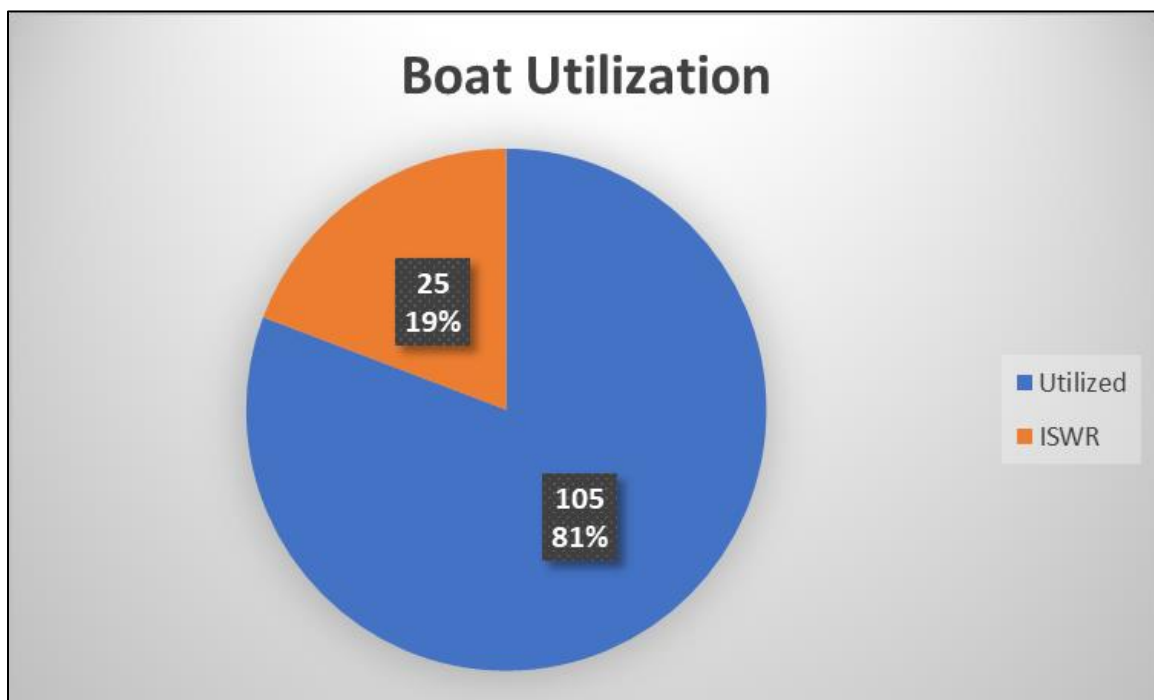
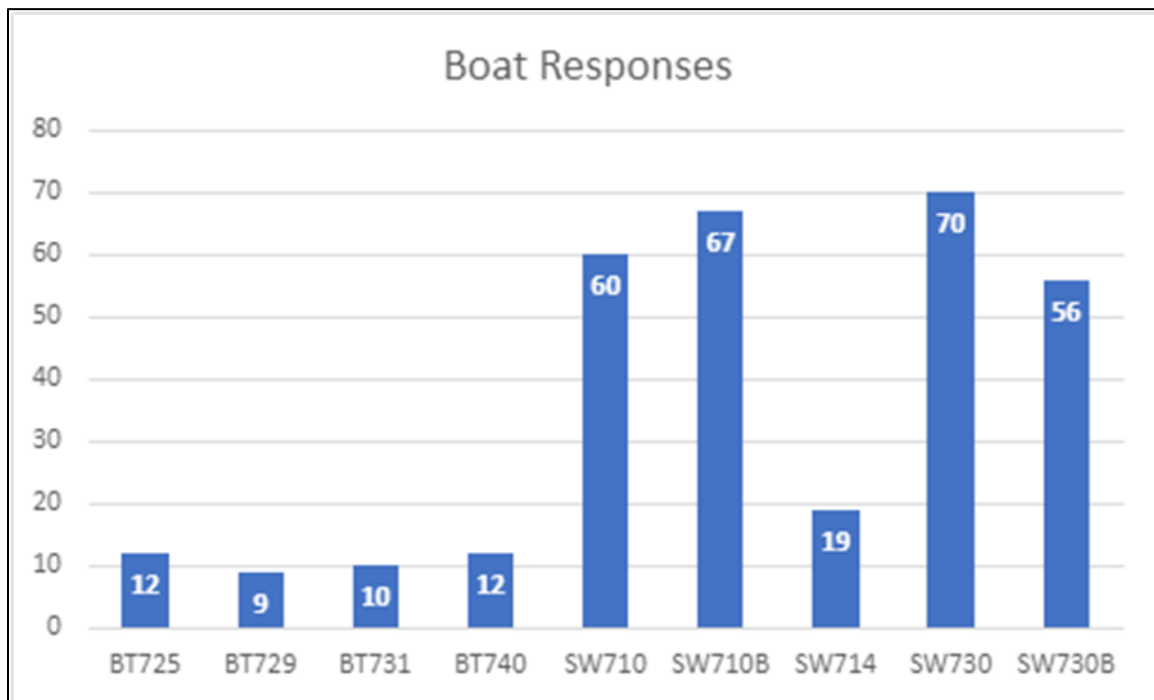
- Revised SOG 17-01: TRT Membership (February 2022)
- Implemented SOG 22-01: Respiratory Protection (May 2022);
- Revised SOG 17-0: Confined Space Rescue (December 2022);
- Revised the process for monthly training plan review and submission process to included enhanced treatment and injury protocols.
- Draft / Pilot program for a Technical Rescue Team Officer Task Book (December 2022)

5. PROGRAM OUTPUT, OUTCOMES & IMPACT

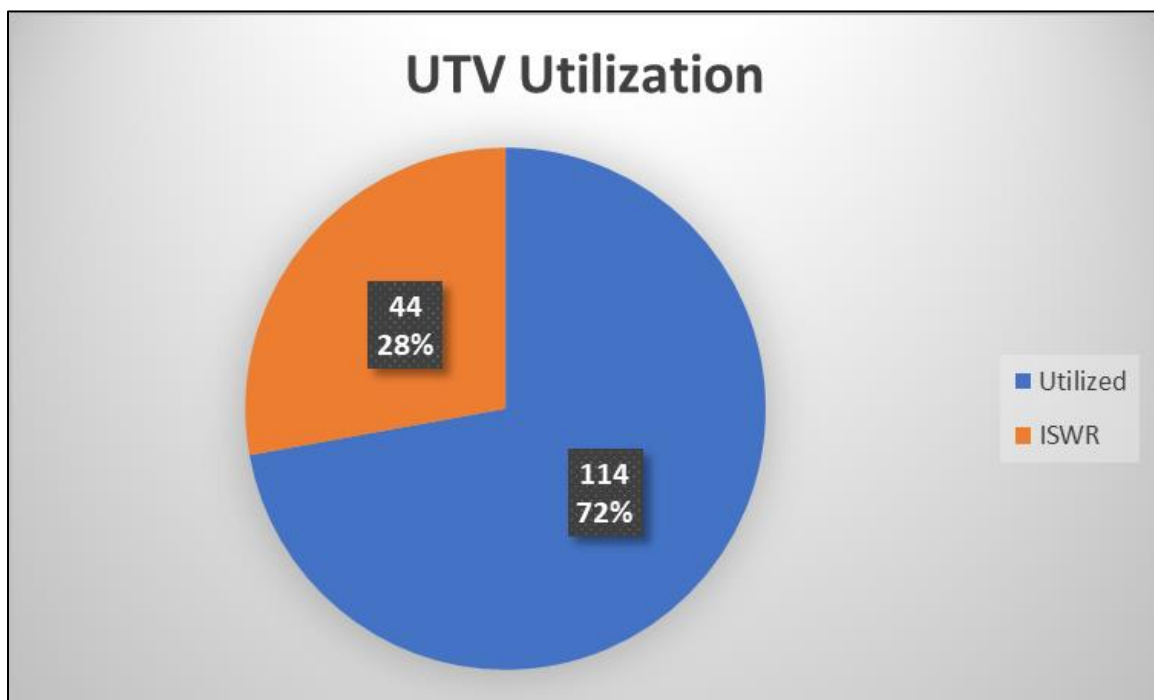
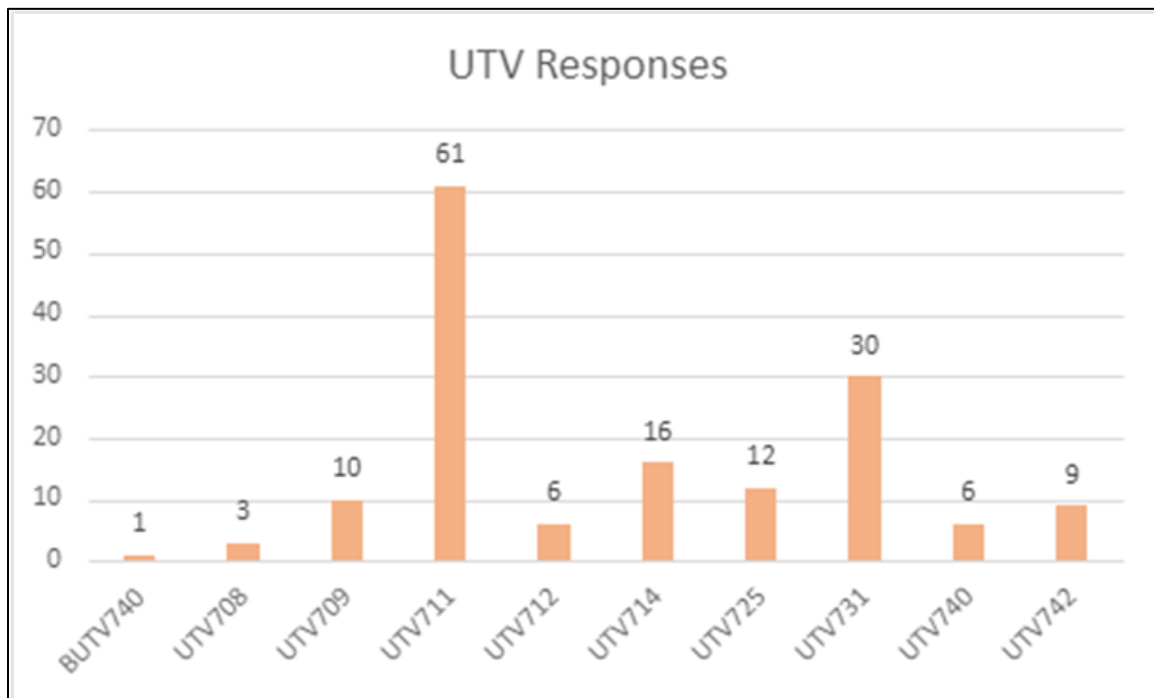
TRT responses for 2022 remained consistent with previous years' response data with twenty-three incidents; however, the number of incidents in which TRT was dispatched and operated is increasing.



SWRT responses also remained consistent with previous years with a slight increase in engagement on incidents.



The Special Operations section also operates a fleet of Utility Vehicles (UTVs) with a variety of equipment complements to aid on EMS incidents, brush fires, and hauling equipment. This fleet saw a slight increase in incidents and usage in 2022.



6. INITIATIVES/STRATEGIES (2023)

The Special Operations Section will be focused on the following initiatives in 2023:

Swiftwater Rescue Team

- Continue the Potomac River Outreach program and maintain a presence.
- All Swift Water Boat Operators will complete the class on the Garmin Sonar System.

Technical Rescue Team

- Complete two offerings of Technical Search Specialist in coordination with Prince George's County Fire Department TRT;
- Complete one offering of Structural Collapse Specialist in coordination with Howard County Fire Department and Prince George's County Fire Department;
- Receive, upfit, and place in-service a tractor drawn technical rescue vehicle;
- In coordination with the Public Safety Training Academy, offer one Trench Rescue Specialist program;
- Begin the process of replacement and upgrading the rope rescue equipment cache that will "time out" in 2023 and 2024; and
- Conclude, revise, and implement the new Technical Rescue Team Officer Task Book.

FESSAM CATEGORY 5 PROGRAM APPRAISAL

HAZARDOUS MATERIALS INCIDENT RESPONSE TEAM

1. CRITERION & PROGRAM AREA

5H - Hazardous Materials

2. PERIOD OF APPRAISAL

CY2022

3. PROGRAM AREA MISSION STATEMENT

The mission of the Montgomery County Hazardous Materials Incident Response Team is to provide all-hazards preparedness, response, mitigation, and support capabilities from natural and man-made hazardous materials disasters. The team is dedicated to protecting the citizens and visitors of Montgomery County, as well as the water, land, air, and general environment from contamination resulting from the release of hazardous materials.

4. PROGRAM AREA RESOURCES & INPUTS

Personnel

The Hazardous Materials Team continues to operate out of two primary Hazardous Material Unit stations and two Hazardous Materials Support Company stations. CY22 saw an increase in hazardous materials response personnel, as the department provided an AHJ Hazardous Materials Officer course in the summer and a MFRI Hazardous Materials Technician Course in the fall.

- 15 new Hazardous Materials Team members – Increase from CY21
- 6 new Hazardous Materials Officers – Increase from CY21
- 2 new Hazardous Materials Unit Drivers – Increase from CY21

Equipment

The Firstline Dahlgren decontamination equipment from CY21 was placed in-service during the spring of CY22. Personnel were trained on its use and then run through scenarios established by the team's training workgroup to ensure the ability to use the equipment properly for emergency response.

The Hazardous Materials Response Team was able to enhance response capability in CY22 through the purchase of new equipment. Response to chemical warfare/WMD incidents was enhanced through the COG-funded purchase of a single AP4c flame spectrometer detector, enhancing the team's ability to detect nerve, blister, blood, choking and toxic industrial chemicals. This unit replaces the aging AP2ce flame spectrometer detector on one Hazmat Unit and COG has committed to replacement of the other unit's detector in CY23.

In response to the electric vehicle, energy storage systems and lithium-ion battery hazards the fire service is facing, MCFRS made several purchases to enhance response capability. Each Hazmat Unit was outfitted with a Darley Bridgehill electric vehicle fire blanket to assist in the suppression and mitigation of EV car fires. The department also obtained approval to purchase specialized overpack material and drums for use on lithium-ion battery incidents. This equipment was ordered

and is still waiting to be delivered due to backorder issues. MCFRS remains active in a newly formed COG ESF4 Committee responsible for equipment evaluation and procurement for response to EV and ESS emergencies, along with regional procedure development.

Training

There were several hazardous materials-focused training initiatives in CY22 that benefited the department and personnel by reducing community and personnel risk through knowledge gains. A primary focus was holding an in-person AHJ Hazardous Materials Officer course where incumbent Hazardous Material team members at the rank of Captain and Lieutenant were taken through curriculum and scenarios allowing them to operate as Hazardous Materials Officers at the two primary Hazmat stations meeting daily staffing requirements and expanding roster capability with these additional personnel. A MFRI Hazardous Materials Technician course was completed in November CY22 at the PSTA to maintain the offering in-county every two years and ensure Hazardous Materials personnel can receive the base level of training to become a functioning team member.

There were multiple specialty hazardous material training initiatives in CY22. Several hazardous material team members were sent to a train-the-trainer course for Firstline Dahlgren Hybrid Decontamination. These personnel provided team-based training on the processes and equipment to include hybrid decontamination into MCFRS operations. Lithium-ion Battery response was also a focus of the department, and the Hazardous Materials Team was designated as the primary response capability to these incidents. The department supported a vendor-based training on Battery Emergency Response that was offered to all Hazardous Materials Officers in the summer of CY22. Team leadership used the information obtained in this training and other best practices to develop a draft Battery Emergency Response Guideline used by Hazardous Materials Officers and the team for response to these incidents. Team members were also engaged with the PSTA and helped provide in-service training on battery emergencies to the entire department through video platforms.

5. PROGRAM AREA OUTPUT, OUTCOMES & IMPACT

In 2022, hazardous material responses in Montgomery County increased from 153 responses in 2021 to 323 responses. The Hazardous Materials Response Team was utilized on 51% of incidents for a total of 164 responses and consulted on 4 percent of incidents (13 responses). This was a slight decline from a 59% (team response) in 2021, but an increase in the number of team responses overall.

There was a noted decrease in hydrocarbon responses from 69% in CY21 to 55% in CY22. There was also a noted increase during CY22 in household chemical spills (13%) and chemical spills (22%).

CY22 was a successful year for the Hazardous Materials Response Team; however, there are still outstanding items such as SOG revisions and development from CY21 that will need to remain a focus.

6. INITIATIVES/STRATEGIES (2023)

- Increase organizational resilience and decrease risks to responders, citizens, infrastructure and the environment through Hazardous Materials technician training opportunities internally and through COG Hazmat Subcommittee and MDERS funding opportunities.
- Increase organizational resilience by improving response to non-traditional hazards such as photo-voltaic hazards and battery hazards.
- Increase partnerships with vendors/third parties to assist with battery emergency response.
- Increase organizational resilience and reduce risks to responders through continuing evaluation and needed replacement of current hazardous materials response equipment.

FESSAM CATEGORY 5 PROGRAM APPRAISAL URBAN SEARCH & RESCUE (MD-TF1)

1. CRITERION & PROGRAM AREA

5L – Other Programs

2. PERIOD OF APPRAISAL

CY 2022

3. PROGRAM MISSION STATEMENT

Mission of Maryland Task Force One

To create and maintain an elite Urban Search and Rescue “all-hazards” disaster response team that is trained and certified to meet or exceed the highest technical rescue standards; visionary in situational needs assessment and development of deployment strategies and tactics; cutting edge in training and member preparation; well prepared and equipped to deploy to the worst possible disaster scenario; capable and willing to perform search, rescue, and community assistance in the most austere and potentially hazardous environment; and to do so with the highest level of professionalism and compassion for those served, as well as each other.

4. PROGRAM RESOURCES & INPUTS

The National USAR Response System established under the authority of the Federal Emergency Management Agency (FEMA) is a framework for organizing federal, state, and local partner emergency response teams as integrated federal disaster response task forces. MD-TF1 is one of twenty-eight USAR task forces that can be deployed by FEMA to a disaster area to aid in structural collapse rescue or they may be pre-positioned when a major disaster threatens a community. Additionally, MD-TF1 is one of seven national teams providing Hazardous Materials (HazMat) Equipment Push Package (HEPP) capabilities. This allows for HazMat equipment replacement and cache resupply on US&R deployments for national disasters. The HEPP is a self-contained and mobile entity consisting of four MD-TF1 members, two Logistics members and two HazMat members, that can provide additional equipment during emergency operations at local, state, and national levels.

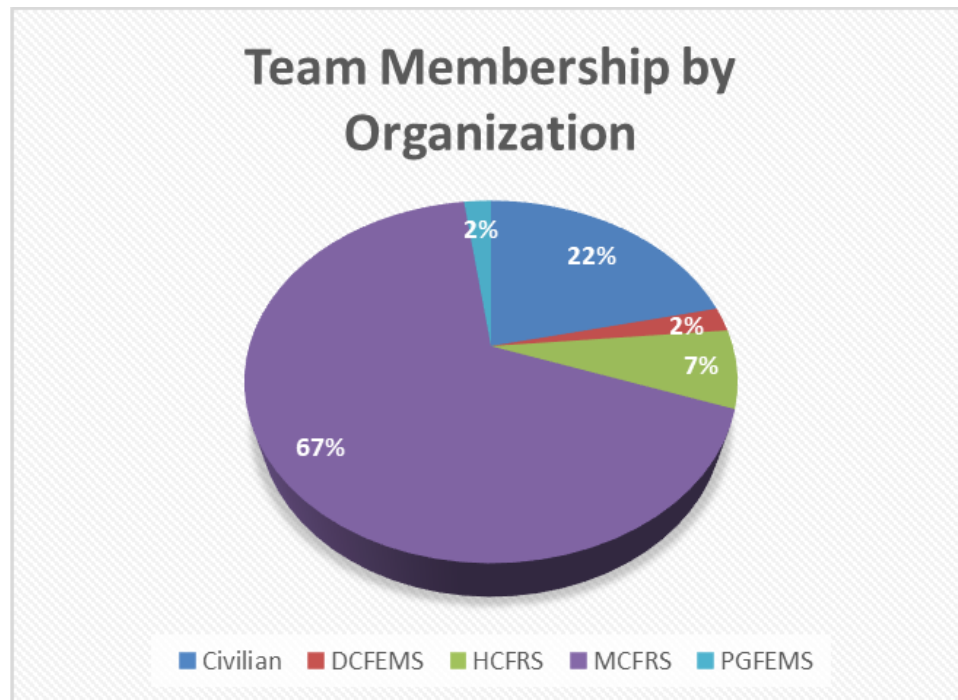
Team members breakdown:

• Montgomery County Fire & Rescue (MCFRS)	126
• Civilians (Physicians, Engineers, Police, Other Professionals)	40
• Prince George’s Fire/Emergency Medical Service Department (PGFEMS)	4
• District of Columbia Fire and Emergency Medical Service (DCFEMS)	4
• Howard County Fire and Rescue Service (HCFRS)	13

The team has increased the numbers of personnel from other jurisdictions, which offers more flexibility in deployments and lessens the impact on MCFRS, allowing for more in-county personnel from the team to respond to local emergencies during MD-TF1 deployments.

Currently finalizing Participating Agency Agreements with:

- Anne Arundel County Fire Department
- Frederick County Fire and Rescue Service



In addition to the deployable team members, MD-TF1 has a full-time civilian Program Manager, a part-time civilian Logistics Coordinator, a part-time civilian Training Manager, a part-time civilian Grants Manager, a part-time civilian Administrative Assistant, and a part-time civilian Warehouse Support Staff member.

Several team members participate in special work groups and/or the Incident Support Team:

- 12 Members on Federal Incident Support Team
- 4 Members on National Workgroups
- 2 Member on National Administrative Readiness Evaluation Team

Additionally, many team members have specialized skills training:

- 60 Members trained in Surface Water Rescue Specialist
- 60 Members trained in Swift Water Specialist
- 27 Members trained in US&R Jon Boat Operators
- 27 Members trained in US&R IRB Boat Operators
- 24 FEMA US&R Instructors across 6 different courses
- 10 FEMA Instructors
- 6 FEMA Lead Instructors
- 13 FEMA Adjunct Instructors
- 40 FEMA Hazardous Materials Technicians

- 70 FEMA Members trained in multiple disciplines
- 9 Deployable Canine Search Teams – Live Find
- 2 Deployable Canine Search Teams – Human Remains

The team continues to operate out of a 33,000 sq. ft facility that includes offices and warehouse space at 701-C Dover Road in Rockville, Maryland. In the past year, Montgomery County Fire and Rescue Special Operations has obtained the adjacent suite, which provides an additional 20,000 sq. ft. of warehouse space. The combined 53,000 sq. ft. houses Maryland Task Force One, Special Operations, Internal Affairs, and Technical Operations.

In 2022, the Linthicum US&R K-9 Training Facility course was revised and redesigned to better accommodate the needs of MD-TF1 and MCFRS canines.

Two addendums are attached to this appraisal, with apparatus and equipment resources. This equipment is well maintained and certified to comply with Department of Transportation (DOT) requirements and inspections.

MD-TF1 operates under the following SOPs and protocols:

- Federal Emergency Management Agency 44CFR, part 208
- National Urban Search and Rescue Response Systems, Operations Manual MD-TF1
- National Urban Search and Rescue System Administrative Manual

MD-TF1 Mobilization Manual Training and Certifications in CY22

- 180 members trained and certified within one of the 19 specialty positions in the task force by completing more than 12,000 man-hours of training in 2022

Calendar Year 2022 Training Hours

Annual Refresher Hours

- | | |
|-------------------------|-----------|
| • MCFRS | 934 hours |
| • Civilian | 262 hours |
| • DCFEMS, PGFEMS, HCFRS | 72 hours |

New Member General & Administrative Training

- | | |
|--|-----------|
| • Federal Training & US&R specific classes | 188 hours |
|--|-----------|

Quarterly Training Hours (FEMA/US&R)

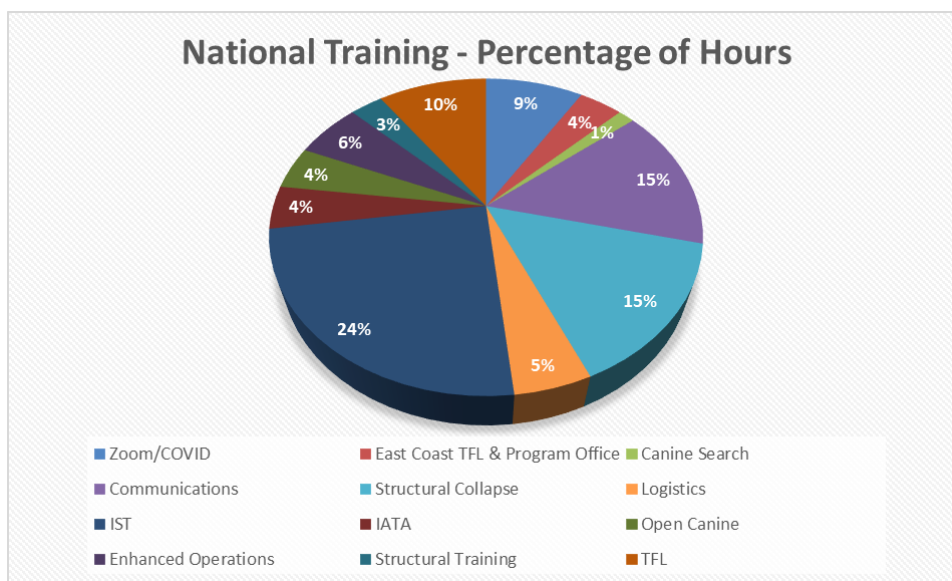
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| • Q1: February 2022 | 896 hours |
| • Q2: May 2022 (Mobilization Exercise) | 1,356 hours |
| • Q3: September 2021 | 928 hours |
| • Q4: November 2022 | 868 hours |

ESF-9 Training Portal

- | | |
|----------------|-----------|
| • CBT Training | 486 hours |
| • Q4: November | 450 hours |

National Level Training

• Zoom/COVID 19 Programs	144 hours
• East Coast TFL & Program Office (On-line)	64 hours
• Canine Search Specialist Program	24 hours
• Communications Specialist Program	240 hours
• Structural Collapse Class	240 hours
• Logistics Specialist Class	80 hours
• IST Continuing Education	400 hours
• IATA On-Line Program	72 hours
• Medical Specialist Program	210 hours
• Open K9 Training (all FEMA Teams)	72 hours
• Enhanced Operations in the Contaminated Environment)	96 hours
• Structural Training Seminar	48 hours
• Task Force Leader Program	160 hours



Canine Specific Training

• Canine 1st and 3rd Saturday of Each Month	930 hours
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IMT Training

• Safety Officer Program	36 hours
• L960 Division Supervisor	96 hours

Technical Rescue Skills (6 Days/Month)

• 36 Days of Technical Rescue based training (Practical/On-line)	2980 hours
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Evaluators for Exercises/Administrative Readiness Evaluation

24 hours

Heavy Lifting and Rigging

72 hours

Monthly Brown Bag on Finance

96 hours

Total training hours for all members

12524 hours

In May 2022, MD-TF1 held a full-scale mobilization exercise in Lorton, Virginia over three days. 113 different personnel attended the training exercise and completed tasks related to all disciplines. The team was evaluated by outside instructors and received a passing score in all five areas: Mobilization, Deployment, Base of Operations, Operations, and Demobilization.

5. PROGRAM OUTCOMES & IMPACT

MD-TF1 remains fully deployable, as validated by its current independent Readiness Evaluation. Although this program creates personnel vacancies during training and deployments, it remains an invaluable county, state, and federal resource with critical search and rescue skills and capabilities, necessary to have a positive impact on incident mitigation and outcomes.

The team was deployed two times in 2022:

Tropical Storm Fiona (Puerto Rico), September 2022	Type III – 35 personnel
Hurricane Ian (Orlando, Florida), October 2022	Type III & Support, 45 personnel



These opportunities allowed for increased visibility at local, state, and national levels to promote the capabilities of the team and increase our reputation with the public.

The specialized skills training, such as HazMat, HEPP, water rescue, and canine search teams, provide MCFRS personnel with professional development opportunities and expands the skill sets and knowledge of our local fire and rescue units, providing additional versatility when responding to emergencies.

6. INITIATIVES

- Continue to expand partnerships with neighboring agencies on rostering personnel for Maryland Task Force One, which will help reduce the impact of personnel on Montgomery County Fire & Rescue. This will also provide additional flexibility for deployments, will reduce the need for backfill, will allow more members to remain in Montgomery County to respond to local emergencies. The maximum number of team members per FEMA US&R task force is 210.
- Continue to cross-train personnel to meet the “All Hazards Approach.”
- Conduct the Operational Readiness Exercise & Evaluation Program, as required by FEMA.
- Prepare for the next generation in leadership through mentoring and training. This will allow successors to better meet the requirements of their new roles and responsibilities, promote consistency, and ensure that MD-TF1 remains ready to deploy with 100% capabilities during transitions.
- Plan for training new personnel to meet position descriptions through alternative methods, including online courses & computer-based training (CBT) and interactive, instructor-led trainings with Zoom and Microsoft Teams. Additionally, interviews can be conducted remotely, which increases the availability of qualified board members to participate and streamlines the on-boarding process.

Addendum A: MD-TF1 National Cache



		U.S. Department of Homeland Security FEMA Urban Search & Rescue Deployment Vehicle Inventory				
VEHICLE INVENTORY (USE ADDITIONAL SHEET IF NECESSARY)		1. INCIDENT NAME (Task Force / Incident): MD-TF1		2. DATE PREPARED: 1/12/2023		
				3. TIME PREPARED: 1300		
4. VEHICLE INFORMATION: Maryland Task Force One						
a.	b.	c.	d.	e.	f.	
Designation	Description	License Plate	VIN #	Qualcomm Unit ID	POC Name	
					GVW	
					Cell / Sat #:	
1	USAR - 8 Tractor 1	2005 Western Star	LG 74556	5KJJAECCKSPV33583		52000
2	USAR - 9 Tractor 2	2005 Western Star	LG 74557	5KJJECK85PV33582		52000
3	USAR - 10 Tractor 3	2021 Western Star	LG 20790	5KJJAEDR0NPNG6002		53000
4	USAR - 6 Box Truck 1	2005 Freightliner	LG 75871	1FVACTDC05HV52240		37500
5	USAR - 7 Box Truck 2	2016 Freightliner	LG 05924	1FVHG3DV7GHHH5495		66000
6	USAR - 5 Logs 350	2020 Ford PU	LG 18499	1FD8W3HT2LEE37504		14000
7	USAR - 1 Pick Up 1	2020 Chevrolet PU	LG 17638	1G04YTEY9L267049		12250
8	USAR - 2 Pick Up 2	2020 Chevrolet PU	LG 17637	1G04YTEYXLF267125		12250
9	USAR - 3 Pick Up 3	2015 Chevrolet PU	LG 00197	1G04KYE85FF176864		11600
10	USAR - 4 Pick Up 4	2015 Chevrolet PU	LG 00198	1G04KYE87FF179166		11600
11	TRAILER 1	2006 KENTUCKY Dry Van	LG 77207	1KKVA53256L220759		65000
12	TRAILER 2	2006 KENTUCKY Dry Van	LG 77208	1KKVA53216L220760		65000
13	TRAILER 3	2010 KENTUCKY Dry Van	LG 92027	1KKVE853248L2301A1		65000
14	Supp TLR	2006 MASTERTRACK	LG 79446	1C9A42T236G09945		12500
15	Boat Trailer 1	One Boat Trailer	LG 97049	19BEK1522CC300026		7500
16	Boat Trailer 2	One Boat Trailer	LG 17635	19BEK1524LC0200015		7500
17	Gator 1	John Deere Gator	N/A	MOHP4DX034438		1403
18	Gator 2	John Deere Gator	N/A	MOHP4DX034437		1403
19	Fork Lift	Moffett Fork Lift	N/A	N410625A		7150
20	Van 1	2005 Chevrolet Van	LG 74555	1GAHG39U61171582		9900
21	Van 2	2005 Chevrolet Van	LG 75872	1GAHG39U061123671		9900
22	Boat 1	Weld Craft Jon Boat		WKG09230F313		
23	Boat 2	Weld Craft Jon Boat		WKG09227F313		
24	Boat 3	Weld Craft Jon Boat		WKG09214E313		
25	Boat 4	Weld Craft Jon Boat		WKG09217E313		
26	SW Boat 1	DIB Inflatable Boat		DIB47557H717		
27	SW Boat 2	DIB Inflatable Boat		DIB47558H717		
28	SW Boat 3	DIB Inflatable Boat		DIB47791E919		
29	SW Boat 4	DIB Inflatable Boat		DIB47801F919		
30	SW Boat Trailer 1	One Boat Trailer	LG 98211	19BEK1527HCC17018		7500
31	SW Boat Trailer 3	Waterman	LG 18220	1W9W1FE16KK568033		3885
32	SW Boat Trailer 4	Waterman	LG 15014	1W9W1FE18KK568034		3885

PAGE: 1 of 1

5. PREPARED BY (GROUND SUPPORT UNIT):
 Brett E.H. Johnson

FEMA USAR Form 18-4

Addendum B: MD-TF1 HEPP Cache

		U.S. Department of Homeland Security FEMA Urban Search & Rescue Deployment Vehicle Inventory					
VEHICLE INVENTORY <small>(USE ADDITIONAL SHEET IF NECESSARY)</small>		1. INCIDENT NAME (Task Force / Incident):	2. DATE PREPARED:	3. TIME PREPARED:			
		HEPP 100/MDTF1	1/12/2023	1300			
4. VEHICLE INFORMATION:							
a.	b.	c.	d.	e.	f.	g.	
Designation	Description	License Plate	VIN #	Qualcomm Unit ID	POC Name	GVW	
						Cell / Sat #:	
1	HEPP Trailer	53' Van Trailer	DH050527T	1DTV115294A302168		40000	
2	HEPP Trailer	SCOTT Air Trailer	DH050900T	56313621CM000475		10000	
3	Dulley PU DH0	Ford F350 Dulley	DH0501263	1FTWW33P96EB10544		14500	
4	HEPP Tractor	Freightliner	DH0501425	1FUJA6CKX5LW28746		52000	
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PAGE: 1 of 1		5. PREPARED BY (GROUND SUPPORT UNIT): Brett E.H. Johnson
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FEMA US&R Form 18-4

FESSAM CATEGORY 8 PROGRAM APPRAISAL PUBLIC SAFETY TRAINING ACADEMY

1. CRITERION & PROGRAM AREA

8B - Training and Competency

2. PERIOD OF APPRAISAL

CY2022

3. PROGRAM AREA MISSION STATEMENT:

The mission of the Fire and Rescue Training Academy is to provide the highest quality training, instruction and evaluation while supporting the County's current and projected educational initiatives.

We strive to deliver comprehensive training programs for career and volunteer fire and emergency services personnel, designed to create a culture of safety and competency.

4. PROGRAM AREA RESOURCES & INPUTS:

Personnel

The PSTA employs 17 full-time staff to meet the instructional needs of the organization. All PSTA uniformed staff are required to obtain Level II MICRB-instructor certification upon assignment. The current full-time positions support the following programs: Firefighter/Rescuer, Recruit Training, Driver Training, EMT, Paramedic, In-Service Training, Command Officer Development and Ancillary Training (PPE, HazMat, Rescue, etc.).

In addition to full-time staff, the Training Academy has approximately 120 MICRB Level II-certified instructors whose primary roles are operation, but who supplement the full-time staff as adjunct instructors. These instructors are available to meet the training needs of the organization in all areas, including fire, EMS, hazmat, technical rescue, water rescue, driving, etc.

Facilities

The Training Academy moved to a new, state-of-the-art facility in CY2016 that provides an increase in capacity and training resources. The new facility exceeds the national standards set by NFPA 1402, Guide to Building Fire Service Training Centers. Training facilities include: single-family burn building, high-rise burn building, high-bay building, apparatus bay building that houses fire apparatus, breathing apparatus, and protective equipment storage, command development center, subway car training prop, flammable liquid training area, vehicle fire training prop, compressed gas training prop, flashover simulator and vehicle extrication and rescue area.

MCFRS shares a large driver training “pad” with Montgomery County Police and Ride-on buses driver training.

In addition to the physical training areas, the new academy provides sufficient capacity and technology to seat up to 350 personnel amongst eight traditional classrooms. In addition, the command development center can be converted to seat roughly 20 people and provides equipment to serve as a classroom. All of the traditional classrooms in the academic building are equipped with state-of-the-art LCD screens, projectors, and audio systems to enhance the learning experience. Further, the academic building houses an audiovisual laboratory for the technical development of training materials.

Apparatus/Equipment

The PSTA has a compliment of EMS and heavy apparatus units used for driver training education and certification. These units also serve as operational reserve apparatus for MCFRS when needed. Currently, the PSTA has 2 Ambulances, one tractor-drawn aerial truck and one engine. When specific classes are in session (e.g, Pumps & Hydrolics), the fleet is augmented by spare apparatus from the department’s fleet (housed at a different location off-site).

Additionally, there are a number of logistical support vehicles, including two passenger vans, one bus, and a pickup truck, as well as a forklift and telehandler for moving heavy equipment, setting up props for training, and various other tasks required for daily operations. Lastly, a flatbed truck is used primarily to pick up/transport salvage vehicles for extrication or rescue training.

SOPs and Protocols

[36-08AM Certification Standards for Training, Experience, and Credentialing Requirements](#)

[23-07AMII Driver Certification Procedure](#)

[23-08 MCFRTA Student Requirements](#)

[23-09 MCFRTA Registration Procedure](#)

[25-06AM PSTA Inclement Weather Policy](#)

[23-05AMIII Command Officer Professional Development Policy](#)

Training and Certifications

Training

- EMT
- Paramedic
- CPR
- Firefighting
- In-service
- Rescue
- Special operations
- Boat operation
- Command competencies
- COPDI
- Recruit/probationary employees
- Public/Stakeholder

Certifications

- MICRB- University System of Maryland entity responsible for the administration of the State Emergency Services Instructor Certification
- EMS unit/heavy apparatus Driver
- Proboard/IFSAC
- EMT-B
- Paramedic

5. PROGRAM AREA OUTPUT, OUTCOMES, & IMPACT

External Impact (Impact on Our Customers):

- Produced highly trained personnel capable of responding to all-hazards incidents in an efficient and effective manner. In CY2022, the PSTA instructors provided over 100,000 hours of per-student instruction. This is by far the highest in the state.

CLASS	TOTAL # Students
Career Recruits	62
Firefighter 1 & 2	59
EMT	98
EMT - Recert	468
Paramedic	24
Paramedic - Recert	384
Driver (EVOC, Class B, Class A)	205
Rescue (Site Ops & VME)	137
FO1 & FO2	65
Instructor 1, Instructor 2	19
PPE	165
HazMat Ops	174
Total Student Class Hours	100,000+

- All the PSTA programs meet, and in most cases exceed, the state-required minimums. Thus, our students are able to perform in emergency situations at a high level of competency.
- Increased public service and stakeholder knowledge via programs such as FireOps 101, Leadership Montgomery, High School Cadet Fire Science program

Internal Impact (Impact within MCFRS):

- Increased the competence and confidence by increasing the education and knowledge of personnel.
- Positive feedback received on newly implemented PSTA programs.

- Introduction of tiered instructor certification allows for potential instructors to engage earlier in their career. Creates additional “career pathways” for increased participation by both volunteer and career personnel.

Unexpected Results

Negative - COVID continued to have negative results on training

- In-service training canceled due to need for social distancing
- Facility requests for company level training denied due to social distancing requirements
- RC49 (PTI) had much greater attrition than expected (26%). We believe that one of the primary factors was the lengthy period of time between CPAT testing and the start of class. For some of the recruits, that time was > 1 year. We added 2 weeks to the class because of the collective poor incoming fitness level of the previously trained recruits.

Positive

- All classes previously cancelled due to COVID onset in 2020, caught up by close of CY2021
- Competence utilizing Zoom, Teams and other virtual platforms increased significantly, adding another “tool to the toolbox”
- Student surveys reflect very positively on the Acquired Structure Training Program and the Challenges in the Streets/Boss Talk programs. Both of these were new in CY2021 and CY2022.

Customer Satisfaction

- Internal and external customer training and demonstrations continue at a steady pace with favorable feedback given.
- Students and other stakeholders consistently provide positive feedback, with an emphasis on the quality of instruction
- Suggestions for improvement evaluated and implemented as appropriate

Accomplishments

- Maintained Recruit Hire Rate to account for attrition
- 2 Recruit Classes in CY2022
- RC48 started with 40 and graduated 37
- RC49 started with 34 and graduated 25
- Resumed collaboration with Montgomery County Public schools by providing EMT training in academic year 2022-23
- Established and implemented the Acquired Structure Training program

Ongoing Initiatives

Maintain PSTA Accreditations

- The PSTA’s re-accreditation by the Maryland Fire Service Professional Qualifications Board (MFSPQB) is scheduled July 2023. The PSTA was the first in the state to successfully complete the preliminary site visit in January 2023.

- Preparation for the Committee of Accreditation of Educational Programs for the Emergency Medical Services Professions (COAEMSP) accreditation of the paramedic training program is ongoing. Reaccreditation is scheduled for July 2024. The Paramedic Program Director is currently working on the Annual Report which is due to COAEMSP in May 2023.

Digitize PSTA Records

Though the Learning Management Program is currently halted, the digitizing portion of the project is ongoing with positive results thus far:

- Driver Training complete
- ALS – 75% complete
- BLS – 90% complete
- RTO – incomplete
- Other (Rescue, Instructor, etc) – incomplete
- Individual Student records incomplete with approximately 15% complete. We are utilizing Light-Duty personnel on this project, so the progress ebbs and flows consistent with LTD personnel assigned to the PSTA.

Build and Sustain Education Partnerships

- Work continues to assist paramedic students in attaining college credits through equivalency agreements with local, in-state, 2- and 4-year college and university programs
- Working with Montgomery College, Montgomery County Public Schools and other private entities to establish Educational Partnerships that benefit all parties.
- Ongoing partnership with Montgomery College Nursing program.
- PSTA leadership is working to improve understanding of issues affecting adult learners and make instructional changes as appropriate.

FESSAM CATEGORY 9 PROGRAM APPRAISAL COMMUNICATIONS

1. CRITERION & PROGRAM AREA

9B - Communications

2. PERIOD OF APPRAISAL

CY 2022

3. PROGRAM AREA MISSION STATEMENT

The mission of the MCFRS Emergency Communications Center is to obtain the necessary information to dispatch the proper response quickly, ensure fire and rescue response personnel have adequate situational awareness of the dispatched event, and to manage all response communications and technologies. ECC strives to ensure the preservation of life and property by treating all who use our services with professionalism, courtesy, and compassion, and by relaying accurate information in a timely and efficient manner.

4. PROGRAM RESOURCES & INPUTS

Personnel: The Emergency Communications Section is led by a Fire and Rescue Assistant Chief, with a direct support staff of one Fire and Rescue Captain and two Fire and Rescue Lieutenants, serving in the professional standards and training positions. A dedicated CAD System manager is also employed by the MCFRS to maintain the Fire & Rescue portion of the CAD system.

Each uniformed FRS Dispatcher and Supervisor is trained on the P25 radio system, CAD, and VESTA phone system.

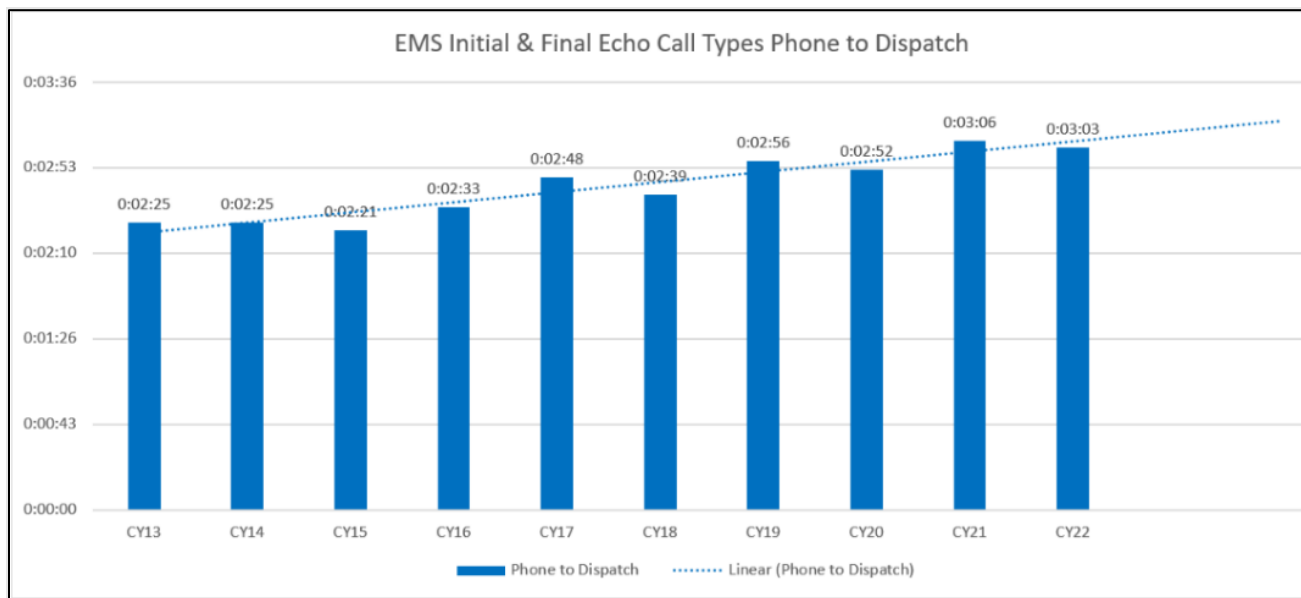
Facilities: The Emergency Communications Section is located at the Public Safety Communications Center (PSCC). This facility houses all resources to intake, dispatch and manage emergency calls for service. The MCFRS also maintains a back-up 911 communications center that provides complete redundant back-up systems if needed in the event of failures at the primary facility. A passenger van is available for transition to the AECC, if necessary.

5. PROGRAM OUTPUT, OUTCOMES & IMPACT

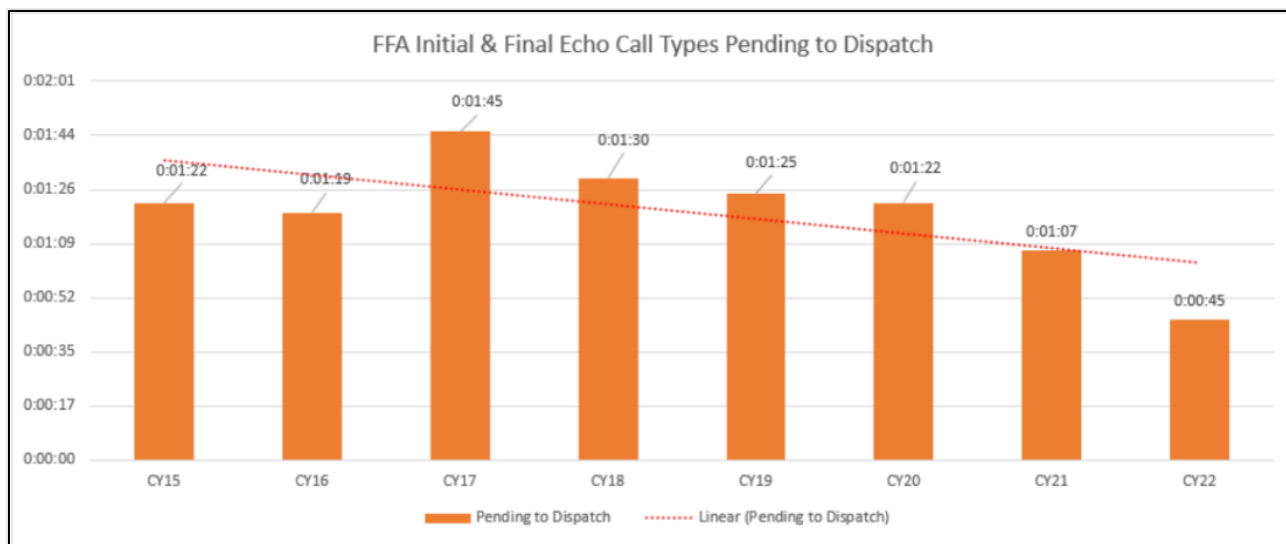
In 2022, the MCFRS ECC dispatched 132,890 incidents, an 8% increase from 2021.

In February 2020, the Montgomery County Police assumed all 911 call taking responsibility. Consolidation of 911 call taking and dispatching under the MCPD continues; however, the timeframe for full consolidation has been pushed back until at least 2025, due to the weak job market. The MCPD has been training incumbent employees in FRS dispatch since 2021. They held three classes in 2022, in addition to a single FRS uniformed class in February 2022. Between the four total classes, much of the dispatching and operations talkgroups were operated by trainees and preceptors.

Overall, phone to pending decreased in 2022. This decrease may be in part to discontinuing COVID surveillance questions in 2021. However, this measure has increased slightly over the last 10 years.



Pending to dispatch, which MCFRS still carries out, continues to have a downward trend. The most significant reason for the decrease is that ECC eliminated many of the analog pager tones before dispatch beginning May 2021 (reference: [FCGO 21-06](#)).



6. INITIATIVES/STRATEGIES (2023)

1. MCFRS and MCP continue with the consolidation, despite hiring challenges of civilian Communication Specialists. MCFRS personnel continue to be preceptors for the on-the-job

training for the MCP personnel training in FRS dispatch.

2. MCFRS will hold a uniformed dispatch/radio class in March 2023. This class will be used to fill vacancies created by transfers and promotions that occur before the consolidation.

FESSAM CATEGORY 11

PROGRAM APPRAISAL

HEALTH & SAFETY

1. CRITERION & PROGRAM AREA

11 - Health and Safety

2. PERIOD OF APPRAISAL

CY2022

3. PROGRAM AREA MISSION STATEMENT

The Wellness/Fitness Section does not have a mission statement at this time. One will be developed and articulated during the next formal appraisal.

The Critical Incident Stress Management Team does have a mission statement...

The Montgomery County Department of Fire Rescue Service Peer Support - Critical Incident Stress Management (PS-CISM) Team Provides management education, debriefings, defusings, demobilizations and one on one support for the members of the Department of Fire/Rescue Service and their families at no cost, in response to incidents of a critical nature. Team members are drawn from the service, career and volunteer, civilian and uniformed and are all trained to, at minimum, a basic level of nationally accepted standards. The focus of this service is to minimize the harmful effects of job stress, particularly in crisis or emergency situations. The highest priorities of the team are placed on confidentiality and respect for the feelings of the individuals involved. It is not the function of the team to replace ongoing professional counseling, but to provide stress management education and immediate crisis intervention. Through the utilization of the CISM Team education process, the MCFRS PS-CISM Team provides an important tool to help alleviate stress related symptoms.

4. PROGRAM AREA RESOURCES & INPUTS:

Personnel

The Health and Wellness section is staffed full time by a Battalion Chief and Captain to manage the operations of the clinic relating to Fire and Rescue personnel. The section staffing is supplemented with a Captain to manage our COVID cases, and a firefighter to manage our physical fitness purchasing and maintenance contracts, these positions are funded using overtime funds.

The Mental Health and Wellness Program is staffed full time by a psychologist and a licensed therapist. The department is currently hiring an additional therapist and an administrative aide. The Critical Incident Stress Management/Peer Support team is led by a Captain as collateral duty with a team of approximately 40 career and volunteer personnel.

Facilities

The MCFRS Fire and Rescue Occupational Medical section (FROMS) has been operating out of a recently renovated county office building located at 27 Courthouse Square Rockville, MD 20850.

The project allowed the consolidation of offices within the Rockville Core from previously leased spaces into a County-owned facility. One of the leased facilities, 255 Rockville Pike, was one of the most expensive leased properties in the County inventory.

<https://montgomerycomd.blogspot.com/2021/09/formal-dedication-held-for-255-million.html>

The department is in the process of consolidating individual therapy offices into a new Mental Health and Wellness Suite with offices for clinical staff and CISM/Peer Support leadership, as well as a training and conference/meeting space.

Apparatus/Equipment

FROMS has one vehicle assigned to the section. The FROMS Battalion Chief is assigned a take home vehicle in order to attend meetings or be available to respond on calls as needed to assist operations.

SOPs and Protocols:

FROMS guiding documents

- [Medical Standards for Operational Members & Candidates of MCFRS](#)
- NFPA 1582 (2013) Standard on Comprehensive Occupational Medical Program for Fire Departments
- [Drug Screening Procedure for Volunteer Applicants](#)
- [Respiratory Protection Policy](#)
- [Substance Abuse Testing and Rehabilitation](#)
- [Worker's Compensation Claims](#)
- [Employment Drug Testing](#)
- [Non-Service Connected Light Duty](#)
- [Service-Connected Light Duty](#)
- [Communicable Disease and Hazardous Materials Exposure Policy](#)

The Mental Health and Wellness Program has documented on-line processes for individuals seeking help. Refer to the following links:

- [Mental Health Resources - PS-CISM \(google.com\)](#)
- [Mental Health Resources \(google.com\)](#)

Training and Certifications:

CISM/Peer Support Personnel

- International Critical Incident Stress Foundation (ICISF) Individual / Group Crisis Intervention Certifications

5. PROGRAM AREA OUTPUT, OUTCOMES & IMPACT

Daily tracking of personnel off of the floor (Not available to Work list) [See example provided.](#)

Key Accomplishments:

- Build-out and move to new FROMS facility
- Build-out and move to new Mental Health and Wellness Facility
- Significant progress made towards digitizing individual medical records
- Gained budget authority to expand Mental Health and Wellness clinical and administrative staff
- Successfully bid out and selected a new vendor to provide occupational medical services, in cooperation with the County Office of Human Resources.

Unexpected Results (positive or negative), if any:

- With the new vendor, there is an expectation that the number of medical examination appointments per day will increase

Customer Satisfaction

- In the past, FROMS has not conducted Customer Satisfaction surveys in order to gauge performance/satisfaction of our personnel during their visits to the clinic. Our new contractor Concentra is working on developing a Fire and Rescue specific customer service form. This form will allow us to track customer satisfaction levels and allow us to gather data for the next appraisal period.

Internal Impact (within MCFRS):

- Identified Cardiac/medical issues during physicals: 10 cases identified in CY22