



ADMINISTRATIVE COMMITTEE MEETING

TUESDAY, SEPTEMBER 28, 2021 – 1:30 PM

LOMA LINDA-EOC 25541 BARTON RD, LOMA LINDA

AGENDA

The CONFIRE Administrative Committee Meeting is scheduled for Tuesday, September 28, 2021 in the Loma Linda Fire Department Community Room, 25541 Barton Road, Loma Linda, California.

Reports and Documents relating to each agenda item are on file at CONFIRE and are available for public inspection during normal business hours.

The Public Comment portion of the agenda pertains to items NOT on the agenda and is limited to 30 minutes; 3 minutes allotted for each speaker. Pursuant to the Brown Act, no action may be taken by the Administrative Committee at this time; however, the Committee may refer your comments/concerns to staff or request that the item be placed on a future agenda.

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact CONFIRE at (909) 356-2302. Notification 48 hours prior to the meeting will enable CONFIRE to make reasonable arrangements to ensure accessibility to this meeting. Later requests will be accommodated to the extent feasible.

A recess may be called at the discretion of the Administrative Committee.

CALL TO ORDER

- a. Flag Salute
- b. Roll call/Introductions

PUBLIC COMMENT

An opportunity provided for persons in the audience to make brief statements to the Administrative Committee. (Limited to 30 minutes; 3 minutes allotted for each speaker)

INFORMATION RELATIVE TO POSSIBLE CONFLICT OF INTEREST

Agenda items may require committee member abstentions due to conflict of interests and financial interests. CONFIRE Administrative Committee member abstentions shall be stated under this item for recordation on the appropriate item.

CONSENT ITEMS

The following items are considered routine and non-controversial and will be voted upon at one time by the Administrative Committee. An item may be removed by a Committee Member or member of the public for discussion and appropriate action.

1. Approve Administrative Committee Minutes of August 24, 2021
2. CONFIRE Operations Statement as of 06-30-21
Fund Balance Report as of 06-30-21 (Unaudited)
CONFIRE Operations Statement as of 08-31-21
Fund Balance Report as of 08-31-21 (Unaudited)
3. Billable Incidents
Call Summary YTD 2021
PSAP Answer Time YTD 2021

DIRECTOR REPORT

4. ACE Re-Accreditation (**See Attachments**)
 - a. Special Presentation- Ingrid Johnson, GIS Coordinator
 - b. ECNS
 - Center for Medicare/Medicaid ET3 NOFO Application
 - American Nurses Foundation/CareStar Foundation
 - PSA Program
 - c. Victor Valley College Telecommunications Program

COMMITTEE REPORTS

- a. Support Committee Report/MIS Updates - Blessing Ugbo
- b. Ops Chief Committee Report - Chief Bruner
- c. CAD to CAD - Chief Rojer

OLD BUSINESS

5. Public Records Act
6. First Due
7. Call Processing Time
 - Quick Launch for CVA

NEW BUSINESS

8. Strike Team Incident Personnel Tracking (**Action Item**)

ROUND TABLE

CLOSED SESSION

ADJOURNMENT

Upcoming Meetings:

Next Regular Meeting: October 26, 2021 at 1:30 p.m.

POSTING:

This is to certify that on September 23, 2021, I posted a copy of the agenda:

- 1743 Miro Way, Rialto, CA

- on the Center's website which is www.confirer.org

-25541 Barton Rd., Loma Linda, CA

 /s/ Liz Berry

Liz Berry
Administrative Secretary I



ADMINISTRATIVE COMMITTEE MEETING

TUESDAY, AUGUST 24, 2021 – 1:30 PM

LOMA LINDA COMMUNITY ROOM-25541 BARTON RD., LOMA LINDA

MINUTES

ROLL CALL

ADMINISTRATIVE COMMITTEE MEMBERS:

Chief Tim McHargue/Chairperson, Colton Fire
 Chief Ivan Rojer/Vice-Chairperson, Rancho Cucamonga Fire
 Chief Ken Harrison, Apple Valley Fire Protection District
 Chief Tim Shackelford, Chino Independent Fire District-*Absent*
 Chief Dan Harker, Loma Linda Fire-*Absent*
 Chief Jim Topoleski, Redlands Fire-*Chief Rich Sessler representing*
 Chief Sean Grayson, Rialto Fire
 Chief Dan Munsey, San Bernardino County Fire
 Chief Jeff Armstrong, Victorville Fire Department

CALL TO ORDER

- a. Flag Salute
- b. Roll call/Introductions

PUBLIC COMMENT

An opportunity provided for persons in the audience to make brief statements to the Administrative Committee. (Limited to 30 minutes; 3 minutes allotted for each speaker)

INFORMATION RELATIVE TO POSSIBLE CONFLICT OF INTEREST

Agenda items may require committee member abstentions due to conflict of interests and financial interests. CONFIRE Administrative Committee member abstentions shall be stated under this item for recordation on the appropriate item.

No conflicts were announced.

CONSENT ITEMS

The following items are considered routine and non-controversial and will be voted upon at one time by the Administrative Committee. An item may be removed by a Committee Member or member of the public for discussion and appropriate action.

1. Approve Administrative Committee Minutes of June 22, 2021
2. Data Reports-PSAP Answer Time, Call Answering Performance Survey, Call Summary YTD 2021, Billable Incidents July 2021
3. Medical Director Contract Amendment

4. Messina & Associates Contract renewal
5. City of Redlands Liaison Renewal

Motion to accept all items on Consent.

*Motion by: Chief Dan Munsey
 Second by: Chief Jeff Armstrong
 Chief Tim McHargue-Abstain (1)
 Chief Ivan Rojer-Yes (1)
 Chief Ken Harrison-Yes (1)
 Chief Tim Shackelford -Absent
 Chief Dan Harker-Absent
 Chief Rich Sessler-Yes (1)
 Chief Sean Grayson-Yes (1)
 Chief Dan Munsey-Yes (4)
 Chief Jeff Armstrong-Yes (1)
 9-Yes
 2-Absent
 1-Abstain-Chief Tim McHargue*

Motion Passed

DIRECTOR REPORT

- a. ECNS
 - San Bernardino county Police Chiefs, HASC and various Cities/jurisdictions
 - ET3 application
 - PSA's (**RIGHT CARE – RIGHT TIME, every second counts**)
- b. Victor Valley College
 - Dispatch Certifications
 - CTE
- c. Staffing
 - Vertical Alignment
- d. Public Records Act

Further discussion required.

COMMITTEE REPORTS

- a. Support Committee Report/MIS Updates - Blessing Ugbo

CONFIRE will transition from using Zoom to Teams as the virtual platform beginning 2022.
- b. Ops Chief Committee Report - Chief Cisneros
 - After action comments from July 4th BC coverage in CommCenter*
 - Committee's mission/vision considerations*
 - Tablet Command single instance-success*

-Ops Chiefs directed to develop recommendations for Command Center model which expands beyond BDC to include all of XBO.

c. CAD to CAD - Chief Rojer

-Chino PD implementation phase to begin withing 2 weeks.

-AMR legal agreement delayed by AMR CAD vendor. Exploring a Point-to-Point connection but initial quote cost prohibitive.

-Riverside County Fire to take agreement to next Board of Supervisors meeting and implementation to follow.

-Cal Fire – SB County agreement as an allied agency approved locally but now needs State approval.

-IROC implementation remains in planning phase and likely will transition to implementation at the conclusion of fire season.

6. Inland Empire Public Safety Operations Platform – **ACTION ITEM**

As the Administering agency for the IE PSOP project, CONFIRE must enter into separate agreements with participating agencies to process payments for the program with the vendor Central Square due to UASI grant funding guidelines. Initial funding for the project for these agencies will be provided by the USAI funds awarded to CONFIRE in 2019 and 2020. On-going maintenance costs will be paid up front by CONFIRE then reimbursed to CONFIRE by the participating agencies.

Agencies in this round of agreements are Member Agencies, Murrieta Fire, CAL FIRE – Riverside County and Chino Police Dept. Allied Agency: CAL FIRE – San Bernardino. In the Chino PD agreement CONFIRE has partnered with Chino Valley Fire to assist Chino PD to enter the program as a two-year pilot by agreeing to share the cost of the annual maintenance with CVFD. This cost is \$22,245 for the two years. CONFIRE will seek alternate sources of funding, but this cost may be incurred by CONFIRE.

These agreements have been fully vetted and approved by CONFIRE legal.

Motion to APPROVE Inland Empire Public Safety Operations Platform (IE PSOP) CAD to CAD agency agreements for Chino PD, Cal Fire – Riverside County, CAL FIRE San Bernardino and Murrieta FD. Authorize CONFIRE Director to execute the agreements with any minor changes being reviewed and approved by CONFIRE legal counsel.

Motion by: Chief Ivan Rojer

Second by: Chief Ken Harrison

Chief Tim McHargue-Yes (1)

Chief Ivan Rojer-Yes (1)

Chief Ken Harrison-Yes (1)

Chief Tim Shackelford -Absent

Chief Dan Harker-Absent

Chief Rich Sessler-Yes (1)

Chief Sean Grayson-Yes (1)
Chief Dan Munsey-Yes (4)
Chief Jeff Armstrong-Yes (1)
10-Yes
2-Absent

Motion Passed

OLD BUSINESS

7. Dispatch Call Processing Time – Mat Fratus

Initial data from quick launch and auto dispatch implemented on June 7, 2021, shows overall call processing time interval from call pick-up to when the first responding unit is notified of the call decreased 21% for Echo and 14% for Delta level calls. Chiefs directed CONFIRE staff to explore expanding program to include Bravo determinate calls and expand auto dispatch call types to CVA's.

NEW BUSINESS

8. Tablet Command AVL Data Sharing Agreement – **ACTION ITEM**

Tablet Command (TC) has developed and released the ability to share AVL data between its various customers. This feature is enabled on an opt in basis, meaning those agencies that opt in will be able to see the AVL data from other Tablet Command customers who have also opted into this service. A data sharing addendum to the current CONFIRE agreement would allow Tablet Command to share data from CONFIRE with other Tablet Command customers. This agreement is necessary as the Tablet Command Service Agreement prohibits Tablet Command from sharing customer data of any kind. There is no fiscal impact to CONFIRE.

Motion to allow Tablet Command to share AVL information with other Tablet Command Customers.

Motion by: Chief Jeff Armstrong
Second by: Chief Dan Munsey
Chief Tim McHargue-Yes (1)
Chief Ivan Rojer-Yes (1)
Chief Ken Harrison-Yes (1)
Chief Tim Shackelford -Absent
Chief Dan Harker-Absent
Chief Rich Sessler-Yes (1)
Chief Sean Grayson-Yes (1)
Chief Dan Munsey-Yes (4)
Chief Jeff Armstrong-Yes (1)
10-Yes
2-Absent

Motion Passed

ROUND TABLE

Chief McHargue expressed his appreciation to CONFIRE's personnel assisting with IROC orders. Chief Rojer voiced his appreciation for the discipline and courtesy shown by CONFIRE employees.

Chiefs agreed, after discussion, to task the Ops Committee with researching communication options available for use between private ambulance providers and CONFIRE dispatch.

CLOSED SESSION

ADJOURNMENT

Motion to adjourn the CONFIRE Administrative Committee Meeting

Motion by: Chief Dan Munsey

Second by: Chief Tim McHargue

Ayes: 10

Absent: 2

Noes: 0

The meeting adjourned at 1500.

Upcoming Meetings:

Next Regular Meeting: September 28, 2021, at 1:30 p.m. Loma Linda Community Room 25541 Barton Rd., Loma Linda.

 /s/ Liz Berry

Liz Berry

Administrative Secretary I



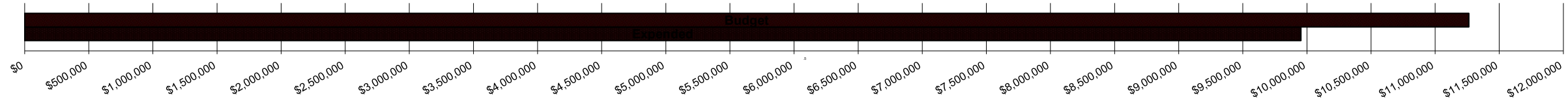
**OPERATIONS FUND 5008
UNAUDITED MONTHLY SUMMARY FY 2020/21**

Transactions thru June 30, 2021

Item 2.

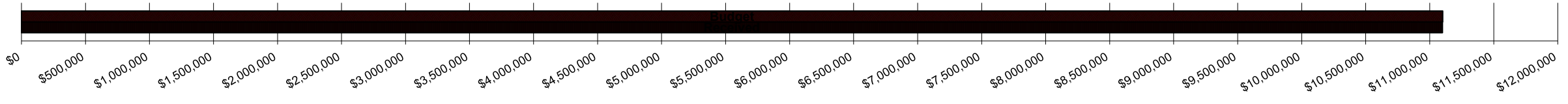
Expenditures	3 PP					3 PP					3 PP		Total YTD Expended	2020/21 Budget	Bud - Exp Difference	% Used
	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June				
Salary/Benefits	703,250	500,928	528,753	527,455	518,203	774,990	500,670	499,399	494,972	280,050	523,577	838,694	6,690,940	7,763,114	\$1,072,174	86.2%
Overtime/Call Back	36,039	24,901	27,203	25,540	24,806	42,257	28,451	24,401	25,878	11,090	24,314	42,962	337,843	330,565	-\$7,278	102.2%
Phone/Circuits/Internet	57,606	23,347	56,744	39,590	54,826	67,988	72,496	28,995	88,088	37,204	57,403	59,625	643,913	538,049	(\$105,864)	119.7%
County IS/Data Services/Counsel	-	6,866	1,635	1,539	3,188	3,494	13,979	(3,889)	3,164	9,779	6,132	15,968	61,854	61,761	-\$93	100.2%
Radio/Pager, Console Maint	-	39,459	39,459	43,014	39,581	40,125	39,659	39,686	39,731	39,749	39,920	80,629	481,012	483,541	\$2,529	99.5%
Computer Software	185,678	459,075	201,684	3,268	6,558	144	(3,270)	28,520	541,826	29,529	3,932	(334,582)	1,122,361	1,421,299	\$298,938	79.0%
Computer Hardware	-	187,089	(185,089)	787	288	162	-	105,756	(105,436)	162	442	2,595	6,754	18,450	\$11,696	36.6%
Office Exp/Copier Lease	5,058	3,528	3,122	3,731	4,904	3,043	2,543	10,005	4,235	21,224	3,429	4,820	69,641	71,044	\$1,403	98.0%
Insurance/Auditing	18,936	-	21,213	11,322	-	-	2,995	-	-	-	-	-	54,466	37,600	(\$16,866)	144.9%
Payroll/HR/Medical Director	5,001	65,524	3,839	18,655	2,350	2,928	(9,266)	3,598	2,304	3,495	2,898	131,714	233,040	232,850	(\$190)	100.1%
Travel/Training	300	9,396	(891)	943	2,502	200	1,066	3,542	85	1,258	1,693	-	20,094	65,000	\$44,906	30.9%
Auto/Structure/Fuel	-	2,010	2,115	1,060	9,977	7,722	(4,023)	(5,941)	1,906	4,150	7,074	(2,438)	23,613	22,900	(\$713)	103.1%
Other/HDGC Rent/Equip Trans	22,218	35,080	28,692	2,669	27,340	14,540	13,693	46,796	14,781	11,877	12,442	(22,432)	207,696	216,649	\$8,953	95.9%
Total	1,034,086	1,357,204	728,479	679,572	694,523	957,591	658,994	780,868	1,111,535	449,566	683,254	817,556	9,953,227	11,262,822	\$1,309,595	88.4%

% Fiscal Year Passed 100.0%



Revenue													Received	Budget	Difference	% Rcvd
	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June				
Services	-	2,713,004	-	2,761,819	248	-	2,792,465	(7,908)	-	2,762,879	-	73,569	11,096,076	11,101,465	\$5,389	100%
Interest	12,712	(12,712)	-	11,089	-	-	7,511	-	-	9,415	-	6,896	34,911	-	(\$34,911)	
Other	(61)	(1,018)	(56,635)	-	-	-	-	1,000	-	-	449	24,693	(31,571)	-	\$31,571	
Total	12,651	2,699,273	(56,635)	2,772,908	248	-	2,799,976	(6,908)	-	2,772,295	449	105,158	11,099,416	11,101,465	\$2,049	100%

% Fiscal Year Passed 100.0%





CONFIRE

FY 2020-2021 Unaudited Fund Balance Report as of June 30, 2021

Operations Fund (5008)

Audited Fund Balance 7/1/20		* \$	2,906,494
Revenue	11,099,416		
Expenditures	<u>(9,953,227)</u>		
	Net		1,146,189
Transfers Out to 5010	(1,250,000)		
Transfers Out to 5011	<u>(452,261)</u>		
	Net Transfers In/Out		<u>(1,702,261)</u>
	Total Fund Balance	\$	2,350,422

*FY 2020-21 Operating costs 10% is \$1,110,147 Per Board Policy

Equipment Reserve Fund (5009)

Audited Fund Balance 7/1/20		\$	2,090,834
Revenue	492,922		
Expenditures	<u>(479,433)</u>		
	Net		13,489
	Total Fund Balance	\$	2,104,323

General Reserve Fund (5010)

Audited Fund Balance 7/1/20		* \$	5,212,728
Revenue - Membership/Interest	75,951		
Revenue - Grant	1,658,864		
Expenditures	<u>(1,860,166)</u>		
	Net		(125,352)
Residual Equity Transfer In	<u>1,250,000</u>		
	Net Transfers In/Out		<u>1,250,000</u>
	Total Fund Balance	\$	6,337,376
Reserve for CIP	(2,000,000)		
EMD Optimization (ECNS) Project	<u>(250,000)</u>		
	Net Committed		<u>(2,250,000)</u>
	Available Fund Balance	\$	4,087,376

*FY 2020-21 Operating costs 25% is \$2,224,736 Per Board Policy

Term Benefits Reserve Fund (5011)

Audited Fund Balance 7/1/20		\$	755,024
Revenue	133,713		
Expenditures	<u> </u>		
	Net		133,713
Tranfer Comp. Absence From 5008	67,272		
Unfunded Liability	<u>384,989</u>		
	Net Transfers In/Out		<u>452,261</u>
	Total Fund Balance	\$	1,340,998



OPERATIONS FUND 5008
UNAUDITED MONTHLY SUMMARY FY 2021/22

Transactions thru August 31, 2021

Item 2.

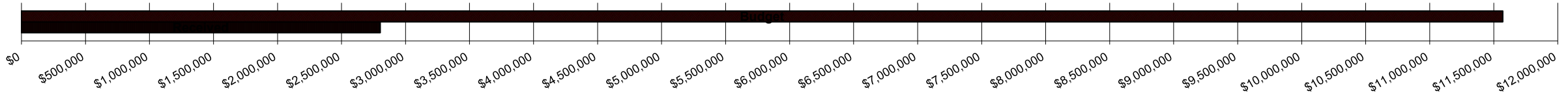
Expenditures	3 PP					3 PP					3 PP					Total YTD Expended	2020/21 Budget	Bud - Exp Difference	% Used
	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	June						
Salary/Benefits	519,723	478,214	-	-	-	-	-	-	-	-	-	-	-	997,937	7,921,125	\$6,923,188	12.6%		
Overtime/Call Back	29,711	33,060	-	-	-	-	-	-	-	-	-	-	-	62,771	289,665	\$226,894	21.7%		
Phone/Circuits/Internet	58,668	30,159	-	-	-	-	-	-	-	-	-	-	-	88,827	588,259	\$499,432	15.1%		
County IS/Data Services/Counsel	4,996	(7,239)	-	-	-	-	-	-	-	-	-	-	-	(2,243)	61,761	\$64,004	-3.6%		
Radio/Pager, Console Maint	-	40,310	-	-	-	-	-	-	-	-	-	-	-	40,310	504,118	\$463,808	8.0%		
Computer Software	584,029	310,561	-	-	-	-	-	-	-	-	-	-	-	894,590	1,470,965	\$576,375	60.8%		
Computer Hardware	45,479	192	-	-	-	-	-	-	-	-	-	-	-	45,671	18,450	(\$27,221)	247.5%		
Office Exp/Copier Lease	11,598	4,558	-	-	-	-	-	-	-	-	-	-	-	16,156	71,044	\$54,888	22.7%		
Insurance/Auditing	25,949	-	-	-	-	-	-	-	-	-	-	-	-	25,949	54,655	\$28,706	47.5%		
Payroll/HR/Medical Director	7,908	64,657	-	-	-	-	-	-	-	-	-	-	-	72,565	279,871	\$207,306	25.9%		
Travel/Training	2,025	1,153	-	-	-	-	-	-	-	-	-	-	-	3,178	65,000	\$61,822	4.9%		
Auto/Structure/Fuel	-	1,937	-	-	-	-	-	-	-	-	-	-	-	1,937	24,047	\$22,111	8.1%		
Other/HDGC Rent/Equip Trans	39,989	42,773	-	-	-	-	-	-	-	-	-	-	-	82,762	221,754	\$138,992	37.3%		
Total	1,330,076	1,000,333	-	-	-	-	-	-	-	-	-	-	-	2,330,409	11,570,714	\$9,240,305	20.1%		

% Fiscal Year Passed 16.7%



Revenue																Received	Budget	Difference	% Rcvd
	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	June						
Services	2,827,160	-	-	-	-	-	-	-	-	-	-	-	-	2,827,160	11,570,714	\$8,743,554	24%		
Interest	6,896	(6,896)	-	-	-	-	-	-	-	-	-	-	-	-	-	\$0			
Other	-	(24,693)	-	-	-	-	-	-	-	-	-	-	-	(24,693)	-	\$24,693			
Total	2,834,055	(31,589)	-	-	-	-	-	-	-	-	-	-	-	2,802,466	11,570,714	\$8,768,248	24%		

% Fiscal Year Passed 16.7%





CONFIRE

**FY 2021-2022
Unaudited Fund Balance Report
as of August 31, 2021**

Operations Fund (5008)

Unaudited Fund Balance 7/1/21		* \$	2,350,422
Revenue			2,802,466
Expenditures			(2,330,409)
	Net		472,057
Transfers Out to 5010			
Transfers Out to 5011			
	Net Transfers In/Out		-
	Total Fund Balance	\$	2,822,479

**FY 2021-22 Operating costs 10% is \$1,157,071 Per Board Policy*

Equipment Reserve Fund (5009)

Unaudited Fund Balance 7/1/21		\$	2,104,323
Revenue			137,307
Expenditures			(29,121)
	Net		108,186
	Total Fund Balance	\$	2,212,509

General Reserve Fund (5010)

Unaudited Fund Balance 7/1/21		* \$	6,337,376
Revenue - Membership/Interest			(95,843)
Revenue - Grant			
Expenditures			(355,362)
	Net		(451,205)
Transfers Out to Fund 5019			(500,000)
	Net Transfers In/Out		(500,000)
	Total Fund Balance	\$	5,386,172
Reserve for CIP			(2,000,000)
EMD Optimization (ECNS) Project			(250,000)
	Net Committed		(2,250,000)
	Available Fund Balance	\$	3,136,172

**FY 2021-22 Operating costs 25% is \$2,892,679 Per Board Policy*

Term Benefits Reserve Fund (5011)

Unaudited Fund Balance 7/1/21		\$	1,340,998
Revenue			194,075
Expenditures			
	Net		194,075
Transter Comp. Absence From 5008			
Unfunded Liability			
	Net Transfers In/Out		-
	Total Fund Balance	\$	1,535,073



CONFIRE

**FY 2021-2022
Unaudited Fund Balance Report
as of August 31, 2021**

CAD-to-CAD Project Fund (5019) - New Fund

Unaudited Fund Balance 7/1/21		\$	-
Revenue			-
Expenditures			(1,279)
	Net		(1,279)
Transfers In from Fund 5010			500,000
	Net Transfers In/Out		500,000
Total Fund Balance		\$	498,721

Total Beginning Fund Balance - 07/01/21	\$	12,133,119
Total Ending Fund Balance - 08/31/21	\$	10,204,954

CONFIRE Billable Incidents

Period: 08/01/2021 thru 08/31/2021

Jurisdiction	# of Incidents	% of Total
San Bernardino County	11,731	52.80%
VictorvilleFD	2,329	10.48%
RanchoCucamonga	1,561	7.03%
ChinoValleyFD	1,242	5.59%
AppleValley	1,114	5.01%
Rialto	1,044	4.70%
Redlands	1,004	4.52%
Colton	669	3.01%
MontclairFD	433	1.95%
Loma Linda	422	1.90%
Big Bear Fire	380	1.71%
San Manuel FD	159	0.72%
Running Springs	61	0.27%
Baker Ambulance	39	0.18%
Road Department	29	0.13%
Total	22,217	100%
BDC Division	# of Incidents	% of Total
East Valley	3,928	33.48%
Fontana	1,909	16.27%
Valley	1,599	13.63%
South Desert	1,143	9.74%
North Desert	1,134	9.67%
Hesperia	1,058	9.02%
Mountain	473	4.03%
Adelanto	471	4.02%
Hazmat	16	0.14%
Total	11,731	100%



Call Summary

CONFIRE/Comm Center

3 W Miro Way
 Redondo Beach, CA 90276 County: San Bernardino

Year 2021

From: 1/1/2021

To: 8/31/2021

Period: Month

Group:

Call Type: All

Abandoned: Include Abandoned

Filters:

Date	911	911 Abdn	Total 911	911 Abdn Percentage	10-Digit Emergency Inbound	10-Digit Emergency Abdn	Total 10-Digit Emergency	Admin Outbound	Admin Inbound	Admin Inbound Abandoned	Total Admin	Total All Calls	Average Call Duration
Jan-21	19569	65	19634	0.33%	14978	989	15967	20246	9203	2303	31752	67353	100
Feb-21	15820	65	15345	0.42%	13030	938	13968	16156	8140	1809	26105	55418	98.5
Mar-21	16681	140	16821	0.83%	14960	1119	16079	17013	11824	2652	30949	63849	117.7
Apr-21	17849	256	18105	1.41%	15340	1384	16724	17531	10412	2169	30112	64941	95.8
May-21	18145	89	18234	0.49%	15610	1157	16767	19789	10260	2130	32179	67180	96.3
Jun-21	18607	85	18692	0.45%	14939	1398	16337	19490	9404	2224	31118	66147	98.3
Jul-21	20322	108	20430	0.53%	16337	1422	17759	20744	9970	2947	33661	71850	96.7
Aug-21	20051	105	20156	0.52%	14270	1078	15348	19463	10345	1626	31434	66938	102.7
2021 Totals	146504	913	147417	0.62%	119464	9485	128949	150432	79018	17860	247310	523676	100.7
2020 Totals	136492	583	137075	0.43%	98011	4427	102438	136312	97118	2208	235639	475152	102.3



PSAP Answer Time

CONFIRE/Comm Center

1743 W Miro Way

Rialto, CA 92376

County: San Bernardino

Month - Year: 1/1/2021 - 8/31/2021

Agency: Fire

Affiliation

From: 1/1/2021

To: 8/31/2021

Period Group:

Time Group: 60 Minute

Time Block: 00:00 - 23:59

Call Type: 911 Calls



Call Hour	Answer Times In Seconds							
	0 - 10	11-15	16 - 20	21 - 40	41 - 60	61 - 120	120+	Total
January 2021 Total	17,242	962	520	613	203	91	3	19,634
% answer time ≤ 10 seconds	87.82%	4.90%	2.65%	3.12%	1.03%	0.46%	0.02%	100.00%
% answer time ≤ 15 seconds	92.72%							
% answer time ≤ 40 seconds	98.49%							
February 2021 Total	13,431	779	391	474	172	93	5	15,345
% answer time ≤ 10 seconds	87.53%	5.08%	2.55%	3.09%	1.12%	0.61%	0.03%	100.00%
% answer time ≤ 15 seconds	92.60%							
% answer time ≤ 40 seconds	98.24%							
March 2021 Total	14,942	768	452	430	145	78	6	16,821
% answer time ≤ 10 seconds	88.83%	4.57%	2.69%	2.56%	0.86%	0.46%	0.04%	100.00%
% answer time ≤ 15 seconds	93.40%							
% answer time ≤ 40 seconds	98.64%							
April 2021 Total	15,519	992	531	639	216	176	32	18,105
% answer time ≤ 10 seconds	85.72%	5.48%	2.93%	3.53%	1.19%	0.97%	0.18%	100.00%
% answer time ≤ 15 seconds	91.20%							
% answer time ≤ 40 seconds	97.66%							
May 2021 Total	15,477	1,017	548	786	249	138	19	18,234
% answer time ≤ 10 seconds	84.88%	5.58%	3.01%	4.31%	1.37%	0.76%	0.10%	100.00%
% answer time ≤ 15 seconds	90.46%							
% answer time ≤ 40 seconds	97.77%							
June 2021 Total	15,019	1,225	741	1,039	435	213	20	18,692
% answer time ≤ 10 seconds	80.35%	6.55%	3.96%	5.56%	2.33%	1.14%	0.11%	100.00%
% answer time ≤ 15 seconds	86.90%							
% answer time ≤ 40 seconds	96.43%							
July 2021 Total	15,945	1,550	898	1,212	512	281	32	20,430
% answer time ≤ 10 seconds	78.05%	7.59%	4.40%	5.93%	2.51%	1.38%	0.16%	100.00%

% answer time ≤ 15 seconds	85.63%							
% answer time ≤ 40 seconds	95.96%							
August 2021 Total	15,559	1,381	907	1,386	535	346	42	20,156
% answer time ≤ 10 seconds	77.19%	6.85%	4.50%	6.88%	2.65%	1.72%	0.21%	100.00%
% answer time ≤ 15 seconds	84.04%							
% answer time ≤ 40 seconds	95.42%							
Year to Date 2021 Total								
Year to Date 2021 Total	123,134	8,674	4,988	6,579	2,467	1,416	159	147,417
% answer time ≤ 10 seconds	83.53%	5.88%	3.38%	4.46%	1.67%	0.96%	0.11%	100.00%
% answer time ≤ 15 seconds	89.41%							
% answer time ≤ 40 seconds	97.26%							
Year to Date 2020 Total								
Year to Date 2020 Total	118,043	7,602	4,069	4,666	1,653	965	77	137,075
% answer time ≤ 10 seconds	86.12%	5.55%	2.97%	3.40%	1.21%	0.70%	0.06%	100.00%
% answer time ≤ 15 seconds	91.66%							
% answer time ≤ 40 seconds	98.03%							



INTEROFFICE MEMO

DATE: September 8, 2021

FROM: Kristen Anderson
Assistant Communications Manager

TO: Art Andres
Director

SUBJECT: IAED EMD Re-Accreditation

CONFIRE Communications has been Re-Accredited as the 169th Accredited Center of Excellence (ACE) with the International Academy of Emergency Dispatch (IAED). IAED has been the standard-setting organization for emergency dispatch and response services worldwide. IAED has been the leading body of emergency dispatch experts for over 40 years.

Every three years CONFIRE goes through a rigorous process of submitting the 20 Points of Accreditation. These points include documentation about who we are, what we do, and how we do it. IAED reviews our QA process, EMD, CPR, and EMD-Q certification status, our training records, meeting notes, even our history as a 9-1-1 center. They evaluate our compliance and they also evaluate the CONFIRE Quality Assurance Team's compliance.

Accreditation (and subsequent re-accreditation) from IAED is the highest distinction given to emergency communication centers, certifying that the center is performing at or above the established standards for the industry. CONFIRE has earned and kept their Medical ACE status for 9 years which proves we are the embodiment of dispatch done right. Our ACE designation puts us in with the top-performing dispatch centers in the WORLD! It shows our citizens and departments that we are 100% committed to providing the best service possible. It is a representation of the hard work that everyone at CONFIRE puts in every day – and not just dispatch, but everyone that supports the operations and services we provide!

“Accreditation is truly a pinnacle achievement”, said Christof Chwojka, Accreditation Board Chair at IAED. “We applaud the dedicated calltakers, dispatchers, and leadership team at CONFIRE for their commitment to quality, and for meeting that high standard that

few achieve. We know their community can count on these first, first responders to do an outstanding job.”

With all the mountains that we have climbed over the last three years, not just with COVID, but with splitting centers, staffing challenges, retirements, injuries/ illness, constant training, major fires, and losing one of our own, we are beyond honored to have gone through the re-accreditation process and come out on top.

ACCREDITED CENTER OF EXCELLENCE



Board of Accreditation Review

STATUS

Approved

Agency Name:	Confire JPA
Call Volume:	120,170
Type:	Medical
MPDS	13.3
ProQA ©	5.1.1.41
AQUA™	7.1.0.7
ED-Q™	10.0.2
Date:	7/2/2021
Reviewer:	SHELLEY ROZEK
Agency Contact	Kristen Anderson/kanderson@confire.org/909-356-2326
Agency History	EMD RE-ACE also uses ECNS QPR client
6 month window	December - May

Section 1. Communication Centre Overview and Description

1a. Document the total number of stations that are active (call taking and dispatching) and those that are supervisory or standby (enter on line 9 of the application form).

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

1b. Include a floor plan showing the placement of each workstation.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

1c. List any current accreditations and the accrediting body.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 2. Medical Priority Dispatch System Version and Licensing Confirmation

2a. Provide the following, as applicable

2ai. MPDS Version Number

Assessment	Meets ACE Standard
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AD Comments	
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Reviewer Notes	version 13.3
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Outstanding Requirement(s)	
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2a.ii. ProQA® Version Number	
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Assessment	Meets ACE Standard
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AD Comments	
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Reviewer Notes	
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Outstanding Requirement(s)	
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2a.iii. AQUA™ version number	
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Assessment	Meets ACE Standard after clarification
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AD Comments	7.1.0. current is 7.1.0.7 please upgrade
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Reviewer Notes	Updated to 17.1.0.7 Aug 3/2021
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Outstanding Requirement(s)	
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2a.iv. ED-Q™ Version Number	
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Assessment	Meets ACE Standard after clarification
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AD Comments	10.0 current is 10.0.2
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Reviewer Notes	Updated to 10.0.2 Aug 3/2021
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Outstanding Requirement(s)	
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2b. Include documentation (policy, directive, etc.) stating that the most recent versions of the MPDS (ProQA and/or card sets) and Performance Standards will be implemented within one year of their release

Assessment	Meets ACE Standard
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AD Comments	
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Reviewer Notes	
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Outstanding Requirement(s)	
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Section 3. Current Academy EMD Certification of All Personnel Authorized to Process Emergency Calls

3a. Provide a list of all EMDs, indicating their names, hire dates, last certification dates, next recertification dates, and Academy EMD certification numbers

Assessment	Meets ACE Standard after clarification
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AD Comments	
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Reviewer Notes	
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Outstanding Requirement(s)	
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Section 4. All EMD Certification Courses are Conducted by Academy-Certified Instructors, and All Case Review is Conducted by Academy-Certified ED-Qs

4a. If you have an in-house or contracted instructor, include her/his name, next recertification date, and certification number.

Assessment	Meets ACE Standard
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AD Comments	
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Reviewer Notes No In house instructor

Outstanding Requirement(s)

4b. List all ED-Qs, indicating their names, next recertification dates, and Academy ED-Q certification numbers

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 5. Full Activity of Quality Improvement (QI) Committee Processes

5a. Include copies of agendas and minutes of all Dispatch Review Committee (DRC) and Dispatch Steering Committee (DSC) meetings (at least two DRC meetings and one DSC meeting in the six months immediately preceding the application).

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

5b. List the names and titles of all committee members for the following:

5bi. Quality Improvement Unit

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

5bii. Dispatch Review Committee

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

5biii. Dispatch Steering Committee

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

5c. List the objectives and tasks of each of these committees

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 6. IAED Quality Assurance and Improvement Methodology

6a. Attach a complete description of the methods used to evaluate EMD performance in using all elements of the MPDS correctly as outlined in the ED-Q Course Manual (consistent reviewing practices). The document should outline the following:

6ai. How cases are randomly selected.

Assessment	Meets ACE Standard after clarification
AD Comments	Are PAI calls pulled at the end of the month included in the random?
Reviewer Notes	These were originally included in the monthly random. Policy updated to state they are not adding these to the random but using them as focused reviews
Outstanding Requirement(s)	

6aii. The minimum number of cases reviewed monthly.

Assessment	Meets ACE Standard
AD Comments	
Reviewer Notes	
Outstanding Requirement(s)	

6aiii. Any focused case review practices employed. This can include cases identified by the agency that warrant additional reviews. Examples are cardiac arrest, choking, and childbirth.

Assessment	Meets ACE Standard
AD Comments	
Reviewer Notes	
Outstanding Requirement(s)	

6b. Attach a detailed description of how EMD performance is checked, tabulated, and tracked.

Assessment	Meets ACE Standard
AD Comments	
Reviewer Notes	
Outstanding Requirement(s)	

6c. Include details and dates of when case review began and how scores were shared with each employee.

Assessment	Meets ACE Standard
AD Comments	
Reviewer Notes	
Outstanding Requirement(s)	

6d. Include details and dates of when shift and center scores were posted.

Assessment	Meets ACE Standard
AD Comments	
Reviewer Notes	
Outstanding Requirement(s)	

Section 7. Consistent Case Evaluation That Meets or Exceeds the Academy's Minimum Expectation

7a. The minimum case evaluation requirement is based on agency size (120170), as follows

between 1% -3% please consult calculator

Assessment **Meets ACE Standard**

AD Comments 267 per month

Reviewer Notes

Outstanding Requirement(s)

7b. List the total number of emergency medical calls received by the center in the six months immediately prior to the accreditation application.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

7c. List the total number of cases reviewed in the same time period.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 8. Historical Baseline QA Data from Initial Implementation of Structured Academy QA Processes (First QI Summary Report, if available)

8a. A baseline QI Summary Report (or equivalent) that includes the following:

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

8b. Determinant Drift Reports (or equivalent) for the center. *Indicate on cover letter if these items are not available.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 9. Monthly average case evaluation compliance levels for the communication center for the six months preceding the accreditation application, with compliance levels at or above accreditation levels for at least the three months immediately preceding application

9a. Include Accreditation report showing compliance levels for the communication center for the six months preceding the accreditation application, with compliance levels at or above accreditation levels for at least three months immediately preceding application:

Assessment **Meets ACE Standard after clarification**

AD Comments
 There is a variation in the number of randoms completed each month
 Dec 247, Jan 288, Feb 300, March 211, April 272, May 229
 This was due to emergency rule because they didn't get to SEND. Struggled to find enough calls to Q. Overdoing some months to make up for less in others to ensure annual random was met.

Reviewer Notes

Outstanding Requirement(s)

9b Include a Communications Center Determinant Drift Report for the three months preceding the application showing that under-response and over-response each occur in no more than 5% of cases.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 10. Verification of correct case evaluation and QI techniques, validated through independent Academy review

10a. Provide copies of 25 case review audio files with merge file for Academy assessment.

10ai. Include 22 calls from the one-month period immediately preceding the application. These calls must be selected purely at random; they must not be cases specifically marked for feedback or other review. Include 22 calls from the one-month period immediately preceding the application. These calls must be selected purely at random; they must not be cases specifically marked for feedback or other review.

Assessment **Meets ACE Standard after clarification**

AD Comments MERGE FILE has 29 cases in it. Please resubmit with 25 cases

Reviewer Notes Updated and submitted

Outstanding Requirement(s)

10a.ii. State the process for random selection of these calls

Assessment **Suggestions for Improvement**

AD Comments

Reviewer Notes For future packages please pull from the previous calendar month for example June instead of the previous 30 days

Outstanding Requirement(s)

10a.iii. Include an additional 3 cases involving Pre-Arrival Instructions. These should be the first case with Pre-Arrival Instructions reviewed in each of the three months immediately preceding the application

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 11. Implementation and/or maintenance of MPDS orientation and Case feedback methodology for all field personnel

11a. Describe your MPDS field personnel orientation process.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

11ai. Include copies of handouts, presentations, and any other materials used.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

11aii. List the number of Field Responder Guides distributed, along with the dates these were given out

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

11b. Describe your EMD case feedback methodology.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

11c. Include a blank copy of the field feedback form utilized by your agency.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

11ci. Include documentation of the dates field feedback forms were distributed to all field stations.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 12. Verification of local policies and procedures for implementation and maintenance of the MPDS. Include all policies relating to EMD practices, which must include the following:

12a. Implementation and application of MPDS

Assessment	Meets ACE Standard
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AD Comments	
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Reviewer Notes	
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Outstanding Requirement(s)	
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12b. Medical Director approval of all MPDS protocols, including those requiring local approval, for example:

OMEGA referrals (OMG VERSION ONLY)

Assessment	Meets ACE Standard
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OBVIOUS DEATH

Assessment	Meets ACE Standard
------------	--------------------

EXPECTED DEATH

Assessment	Meets ACE Standard
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Protocol 14 Obvious Death (submersion ≥ 6 hours)

Assessment	Meets ACE Standard
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Protocol 18 Headache treatment Time Window

Assessment	Meets ACE Standard
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12b. Protocol 24 HIGH Risk

Assessment	Meets ACE Standard
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Protocol 24 OMEGA Referral

Assessment	Meets ACE Standard
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STROKE Treatment Time Window

Assessment	Meets ACE Standard
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Protocol 33 ACUITY Levels (required if using P-33)

Assessment	N/A
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Protocol 37 Medical Professional Authorization (required if using P-37)

Assessment	N/A
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Protocol 37 Stroke Treatment Time Window

Assessment	Meets ACE Standard
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Aspirin Diagnostic and Instruction Tool

Assessment	Meets ACE Standard
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Cardiac Arrest Pathway

Assessment	Meets ACE Standard
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AD Comments	
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Reviewer Notes	Not initially added - Updated Sept 3rd
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Outstanding Requirement(s)	
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12c. Protocol compliance.

Assessment	Meets ACE Standard after clarification
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AD Comments incremental compliance policy is outdated. These metrics are no longer valid
Individual dispatchers are not required to meet ACE performance.
Performance Threshold Report is intended for individual PIP compliance

Reviewer Notes

Outstanding Requirement(s) Updated replaced the ACE metric with Performance threshold report

12ci. Quality improvement

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

12cii. CDE requirements

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

12ciii. Performance management and remediation

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

12civ. Customer service skills (how customer service scores are addressed by your agency)

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

12cv. Language translation processes

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

12d. A policy stating that all emergency medical calls are only processed by EMD-certified personnel, and that employees are removed from their call taking duties if their certification is expired, suspended, or revoked.

Assessment Meets ACE Standard after clarification

AD Comments

Reviewer Notes Updated to include Suspended or revoked.

Outstanding Requirement(s)

Section 13. Copies of All Documents Pertaining to Your Continuing Dispatch Education (CDE) Program

13a. Submit the CDE schedules and topics for the past six months.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

13b. Submit EMD attendance records

Assessment **Meets ACE Standard after clarification**

AD Comments

Reviewer Notes Originally attendance showed greater than 6 months update to 6 months of data

Outstanding Requirement(s)

13c. Submit a CDE schedule draft for the next six months

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 14. Secondary Emergency Notification of Dispatch (SEND) Orientation

14a. Include documentation of the distribution of SEND Protocol information to all police and fire dispatchers and to other agencies routinely forwarding emergency calls.

Assessment **Meets ACE Standard**

AD Comments Is P-36 and Advanced SEND as this is intended for use with things like ski patrol
Have Police services been approached about use of SEND? There is mention of this in April 2020, but no training documentation provided
Have SEND card been distributed to ski patrol?

Reviewer Notes SEND card or copies are distributed to ski patrol on a yearly basis.

Outstanding Requirement(s)

14ai. List the other agencies as applicable.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

14b. Include documentation of agencies trained, copies of attendance records, and any training materials used for this process.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 15. Establish Local Response Assignment For Each MPDS Determinant Code

15a. Include a description of the process for developing response assignments.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

15b. Include a list of all MPDS Determinant Codes and each locally determined response assignment.

Assessment **Meets ACE Standard after clarification**

AD Comments This point requires a list of all MDPS codes and their corresponding local response assignments. A response configuration report is customarily provided for this point. Link in email to instructions

Reviewer Notes Updated and submitted

Outstanding Requirement(s)

15c. Include copies of the specific Dispatch Steering Committee (DSC) minutes with verification that all response assignments are approved.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 16. Maintenance and Modification Processes for Local Response Assignments to MPDS Determinant Codes

16a. Provide documentation describing how local MPDS response assignments are regularly reviewed and how recommended changes are approved.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 17. The Communication Center's Incident (Number of Occurrences) of All MPDS Codes and Levels of the Six Months Immediately Preceding Applicants

17a. Each Chief Complaint (1-37).

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

17b. Each individual Determinant Code (approximately 393).

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

17c. Each Determinant Level (Ω, A, B, C, D, and E).

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 18. Appointments and Appropriate Involvement of the Medical Director to Provide Oversight of the Center's EMD Activities

18a. List the name, address, license number, and country/state/province (or equivalent) in which the Medical Director is licensed to practice.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

18b. Include a copy of the documentation appointing the Medical Director.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

18c. List the approved roles and responsibilities of the Medical Director within the dispatch system.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 19. Agreement to Share Non-Confidential EMD data With the Academy and Others for the Improvement of the MPDS and the Enhancement of EMD in General

19a. Include written verification, signed by the agency's senior executive, agreeing to the above requirement.

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

19b. Include written verification, signed by the agency's senior executive, agreeing to submit the quarterly compliance summary reports to the Academy (submitted electronically through the Academy's website).

Assessment **Meets ACE Standard**

AD Comments

Reviewer Notes

Outstanding Requirement(s)

Section 20. Agreement to Abide by the Academy's Code of Ethics, Code of Conduct, and the Standards Set Forth for an Accredited Center of Excellence

20a. Include written verification, signed by the agency's senior executive, agreeing to the above requirement.

Assessment Meets ACE Standard after clarification

AD Comments

Reviewer Notes Originally missing code of conduct - update to include all three

Outstanding Requirement(s)

20b. Provide the date, location, and verification of the prominent posting of the Code of Ethics, Code of Conduct, and standards

Assessment Meets ACE Standard

AD Comments

Reviewer Notes

Outstanding Requirement(s)

GENERAL REVIEW COMMENTS:

CONFIRE did a wonderful job on this package. It was well organized, and their policies are easy to read. Kristen was great to work with. If a clarification was required she quickly got to work updating the point. Their staff clearly take pride in their job, they follow the protocols well, and provide fantastic customer service. Great work.



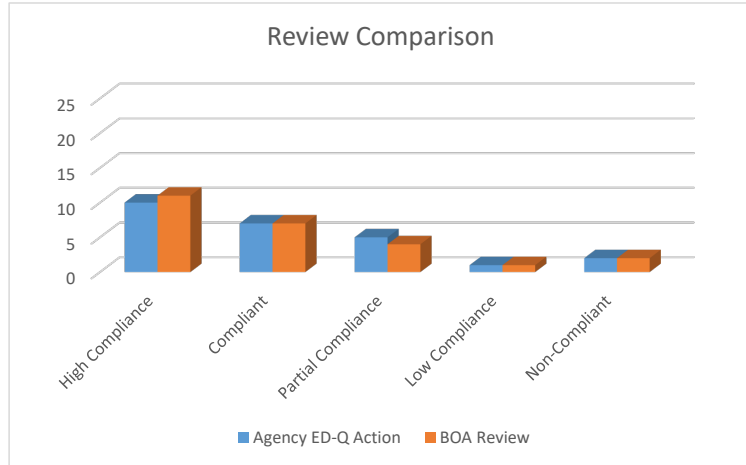
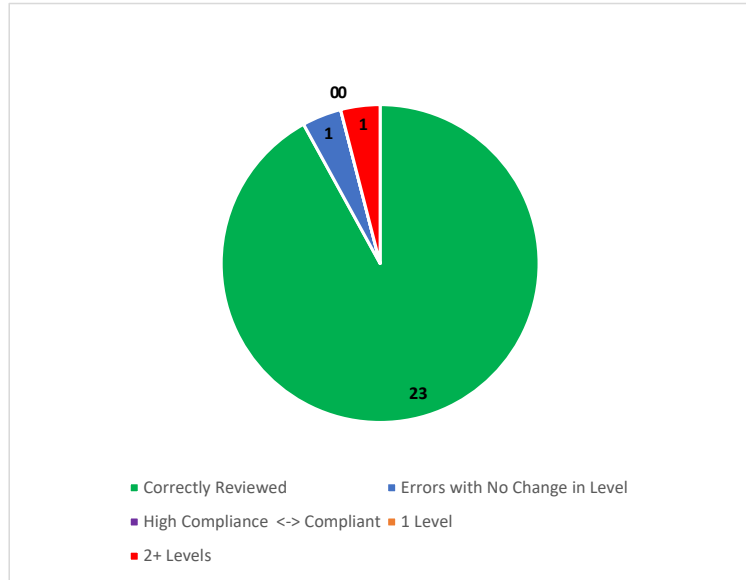
International Academies
of Emergency Dispatch.



PLEASE DO NOT try to manipulate this sheet. It is being filled automatically from data from Point 10 Notes.

COMPLIANCE VARIANCE	
Correctly Reviewed	23
Errors with No Change in Level	1
High Compliance <-> Compliant	0
1 Level	0
2+ Levels	1

REVIEWS	
AGENCY ED-Q	
High Compliance	10
Compliant	7
Partial Compliance	5
Low Compliance	1
Non-Compliant	2
BOA REVIEWER	
High Compliance	11
Compliant	7
Partial Compliance	4
Low Compliance	1
Non-Compliant	2



Case Type	AQUA #	Agency Compliance	BOA Compliance	Variance	Comments
PAI-1	PAI - 2791526	COMPLIANT	COMPLIANT	Correctly Reviewed	Call taker was very persistent with the caller who was extremely hard to get an answer from. Caller was very vague and provided conflicting information.
PAI-2	PAI - 2760990	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	
PAI-3	PAI - 2733122	PARTIAL COMPLIANCE	PARTIAL COMPLIANCE	Correctly Reviewed	
Random-1	2805023	NON COMPLIANCE	NON COMPLIANCE	Correctly Reviewed	
Random-2	2803298	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	
Random-3	2801599	PARTIAL COMPLIANCE	PARTIAL COMPLIANCE	Correctly Reviewed	
Random-4	2799741	COMPLIANT	COMPLIANT	Correctly Reviewed	
Random-5	2799016	COMPLIANT	COMPLIANT	Correctly Reviewed	
Random-6	2797481	PARTIAL COMPLIANCE	PARTIAL COMPLIANCE	Correctly Reviewed	AQUA - subchief compliant marked as NA when it was used - no score change
Random-7	2797535	LOW COMPLIANCE	LOW COMPLIANCE	Correctly Reviewed	
Random-8	2796908	COMPLIANT	COMPLIANT	Correctly Reviewed	
Random-9	2794756	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	
Random-10	2794764	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	
Random-11	2794121	PARTIAL COMPLIANCE	HIGH COMPLIANCE	2+ Levels	There was a space before the letter in the final coding suffix, causing a partial compliance deduction when it should have been high compliant
Random-12	2790365	PARTIAL COMPLIANCE	PARTIAL COMPLIANCE	Correctly Reviewed	
Random-13	2788088	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	
Random-14	2788238	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	
Random-15	2786385	COMPLIANT	COMPLIANT	Correctly Reviewed	
Random-16	2785044	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	
Random-17	2784093	COMPLIANT	COMPLIANT	Correctly Reviewed	
Random-18	2783314	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	
Random-19	2783268	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	
Random-20	2782266	COMPLIANT	COMPLIANT	Correctly Reviewed	AQUA errors - PDIs were not marked as obvious or NA - No change in the AQUA score.
Random-21	2782351	NON COMPLIANCE	NON COMPLIANCE	Errors with No Change in Level	Inappropriate clarifier "You fell through the wood?" This call taker did a wonderful job reassuring this patient multiple times that help was on the way.
Random-22	2779650	HIGH COMPLIANCE	HIGH COMPLIANCE	Correctly Reviewed	

This area is for General Comments and Notes:

The scoring of the calls were extremely accurate. The reviewers obviously have a good understanding of the Performance Standards. They easily picked up on inappropriate clarifiers and where there were errors explained why it was considered an error. The call takers were very polite, professional and obviously adhere to policy extremely well. Great work.



CONFIRE

STAFF REPORT

DATE: 9/23/2021

FROM: Art Andres, Communications Director

TO: Administrative Committee

SUBJECT: Public Records Act – Policy 3.001

RECOMMENDATION

Adopt Administrative Policy 3.001- Public Access to CONFIRE Records.

BACKGROUND

Citizens have a right to access public records of CONFIRE as outlined in the California Public Records Act (PRA) and other state or federal laws. Multiple factors are considered while adhering to PRA requests including private health care information, laws permitting CONFIRE to withhold public disclosure and individual agency desire to communicate directly with the person or entity submitting the PRA.

Administrative Policy 3.001 defines the right of the public to access records, the Director's, or his/her designee, ability to release information according to the PRA and individual CONFIRE agencies ability to provide comment prior to release.

**CONSOLIDATED FIRE AGENCIES OF THE GREATER INLAND EMPIRE
MANUAL OF ADMINISTRATIVE COMMITTEE POLICIES**

POLICY: 3.001
TITLE: Public Access to CONFIRE Records
ADOPTED: [_____]
REVISED: [_____]

Introduction

The Administrative Committee recognizes the right of citizens to access public records of CONFIRE pursuant to provisions of the California Public Records Act and other state or federal laws. The Director, or his/her designee, is directed to permit access to the public records of CONFIRE, excepting those records that the law permits CONFIRE to withhold from public disclosure.

Member Agency and Contracting Agency Records

CONFIRE is a joint powers authority that provides dispatch, communications support, and other assistance (“Assistance”) to various entities including its Member Agencies and Contracting Agencies.

The Administrative Committee directs the Director, or his/her designee, to forward a copy of any request for records to the appropriate Member Agency or Contracting Agency for comment to CONFIRE or to provide an opportunity to the Member Agency or Contracting Agency to seek a Court Order preventing disclosure, and to tender notice of this action to the requestor.

**CONSOLIDATED FIRE AGENCIES OF THE GREATER INLAND EMPIRE
MANUAL OF ADMINISTRATIVE COMMITTEE POLICIES**

POLICY: 3.001
TITLE: Public Access to CONFIRE Records
ADOPTED: [_____]
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Introduction

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Member Agency and Contracting Agency Records

CONFIRE is a joint powers authority that provides dispatch, communications support, and other assistance (“Assistance”) to various entities including its Member Agencies and Contracting Agencies. CONFIRE and its personnel act as the agent of each Member Agency and Contracting Agency receiving Assistance.

~~Records produced by CONFIRE and its personnel when acting as agent for a Member Agency or Contracting Agency are prepared, owned, used, or retained by the assisted Member Agency or Contracting Agency, and not by CONFIRE. Except as required by law, such records shall not be disclosed to members of the public without the prior consent of the affected Member Agency (or affected Contracting Agency or Agencies) that owns the records. This specifically includes, but is not limited to, CONFIRE performance data.~~

The Administrative Committee directs the Director, or his/her designee, to forward a copy of any request for records ~~prepared, owned, used, or retained by a Member Agency or Contracting Agency~~ to ~~that~~ the appropriate Member Agency or Contracting Agency for ~~processing~~ comment to CONFIRE or to provide an opportunity to the Member Agency or Contracting Agency to seek a Court Order preventing disclosure, and to tender notice of this action to the requestor.

**CONFIRE****STAFF REPORT****DATE: 9/23/2021****FROM: Art Andres, Communications Director****TO: Administrative Committee**

SUBJECT: STRIKE TEAM PERSONNEL TRACKING

RECOMMENDATION

Track personnel and resources portal to portal when assigned to incidents outside the Operational Area (OA) and eliminate the requirement for a daily check in, with status report, to Comm Center while at the incident.

BACKGROUND

CONFIRE is the OA ordering point and processes requests for master mutual aid resources. Currently, once resources are assembled, CONFIRE will track while traveling to and from the incident. Once checked in to the incident, resources report their status and assignment for the operational period daily to Comm Center. This process is outlined in the San Bernardino County Fire and Rescue Mutual Aid Operational Plan: *"When assigned out-of-the-area or on local major incidents, leaders of strike teams ordered through the Op Area dispatch center (Comm Center), shall contact them daily to advise their status. This information will then be relayed to the home departments of those units assigned to the team."*

Once checked in to an incident, the incident is responsible for the resources. Often, due to remote locations, communications are limited, making a daily report to Comm Center difficult. CONFIRE Ops Chiefs has found the current process to be redundant and serve no operational purpose. There are additional data entry requirements into CAD resulting from the current policy which do not support the mission of the incident.