

**TAMPA FIRE RESCUE
RESCUE DIVISION
AUDIT 20-04
OCTOBER 1, 2020**



CITY OF TAMPA

Jane Castor, Mayor

Internal Audit Department

Christine Glover, Internal Audit Director

October 1, 2020

Honorable Jane Castor
Mayor, City of Tampa
1 City Hall Plaza
Tampa, Florida

RE: TFR Rescue Division, Audit 20-04

Dear Mayor Castor:

Attached is the Internal Audit Department's report on the Rescue Division of Tampa Fire and Rescue.

We thank the aforementioned management and staff for their cooperation and assistance during this audit.

Sincerely,

/s/ Christine Glover

Christine Glover
Internal Audit Director

cc: John Bennett, Chief of Staff
Nick LoCicero, Fire Chief
Dennis Rogero, Chief Financial Officer
Mark Bogush, Operations Chief
Barbara Tripp, Rescue Chief

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/s/ Debbie Abbott

Auditor

/s/ Anthony Tiwari

Auditor

/s/ Christine Glover

Audit Director

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BACKGROUND

The Tampa Fire Rescue Department (TFR) has 23 stations and is responsible for the mitigation of almost all fire, medical emergencies, heavy rescue and hazardous material situations, which occur within the boundaries of the City of Tampa (City)¹. The Rescue Division is under the direct supervision of the Rescue Chief. The division is staffed by the Rescue Division Supervisor, Quality Management Officer, Special Events Coordinator, and two Emergency Safety Equipment Specialists².

In 2019 there were approximately 72,000 emergency calls where rescue cars and engines were dispatched using the Computer Aided Dispatch System (CAD). Based on type of call, rescue response can be either Advanced Life Support (ALS) or Basic Life Support (BLS). TFR provides all ALS, and contracted vendors generally provide BLS. TFR has a Memorandum of Understanding with Hillsborough County Fire Department, who contracts with the vendors. TFR fire engines are equipped with the same equipment as rescue cars and provides the same level of care.

STATEMENT OF OBJECTIVES

This audit was conducted in accordance with the Internal Audit Department's FY20 Audit Agenda. The objectives of the audit were to evaluate whether:

1. TFR is meeting its established response time standard.
2. TFR has a comprehensive process for identifying city-wide needs for fire districts and fire stations.
3. Controlled substances are monitored, recorded accurately, and any discrepancies addressed.
4. Medical errors are reviewed to identify cause, and any similarities that may have occurred, to ensure appropriate action is taken.
5. TFR personnel are completing the Vehicle Inspection Reports for monitoring vehicles.

STATEMENT OF SCOPE

The audit period covered October 2018 through December 2019. Both qualitative and quantitative assessments were performed to determine whether the management and staff of TFR were fulfilling their stated duties and responsibilities in an effective and efficient manner. Original records as well as copies were used as evidence and verified through observation and physical examination.

¹ TFR Standards of Cover 2015, A. Community Served

² City of Tampa internet website: <https://www.tampagov.net/fire-rescue/about-us/rescue-division>

STATEMENT OF METHODOLOGY

1. Interviewed management to determine the establishment of internal controls.
2. Conducted site visits to review the process for transfer and inventory of controlled substances.
3. Reviewed Vehicle Inspection Reports for monitoring vehicles.
4. Reviewed the process for reporting, listing, and follow up of medical errors.
5. Performed a data reliability analysis to determine the completeness and accuracy of data reported from the TFR CAD System.
6. Performed data analysis on the response times for major medical emergency calls.

The testing was based on the criteria of 90% confidence level and 10% error rate used to infer the results of the testing on the data acquired from TFR. When appropriate, judgmental sampling was used to improve the overall efficiency of the audit.

STATEMENT OF AUDITING STANDARDS

We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our conclusions based on our audit objectives.

AUDIT CONCLUSIONS

Based upon the test work performed and the recommendations noted below, we conclude:

1. TFR is not meeting its established response time standard.
2. TFR has a comprehensive process for identifying city-wide needs for fire districts and fire stations.
3. Controlled substances are monitored, recorded accurately, and any discrepancies are addressed.
4. Medical errors are reviewed to identify cause, and any similarities that may have occurred, to ensure appropriate action is taken.
5. TFR personnel are not completing the Vehicle Inspection Reports for monitoring vehicles.

RESPONSE TIME

STATEMENT OF CONDITION: During a review of 2019 TFR response times for major medical incidents, the rescue division's first vehicle on-scene (rescue vehicles and/or fire engines) arrived within 8 minutes and 30 seconds of the alarm 71% of the time.

CRITERIA: The TFR rescue division's response time goal for major medical incidents is for first vehicle on-scene to arrive within 8 minutes and 30 seconds of the alarm 90% of the time.

CAUSE: Response time metrics are not being frequently generated to ensure goals are being met. There is no standard reporting process or quality assurance review performed to determine if the reporting data is complete and accurate. Further noted, from management discussions, that during higher activity periods communications technicians may not account for units responding or arriving on scene thus contributing to inaccurate time recording.

EFFECT OF CONDITION: Response times are not meeting the internal goal which may indicate a delay in responding to major medical incidents. Management reports may not display the complete data, only a subset that have met the internal goal.

RECOMMENDATION 1: Management should develop a standard reporting process, by creating a monthly metric, to determine if internal goals are being met. There should also be quality assurance personnel to review and determine if the reporting data is complete and accurate. They should identify the reasons for missing the goal and follow up on response times that are outside of the range.

MANAGEMENT RESPONSE: Management agrees that the condition identified by the auditor is legitimate, however some context needs to be provided. Data quality is reliant on two major elements used for electronic data collection: Computer Aided Dispatch (CAD) and the Automated Vehicle Locator (AVL) system. These systems are integral in capturing and archiving call types and responses, apparatus used, and response times. If either of these systems are unavailable or degraded, this department is unable to collect the proper data to determine, among other things, crew response times. This is an issue that has plagued this department for some time and, as such, is in the process of being mitigated. The City has provided funding for a new CAD and AVL system and the installation process is ongoing. Once the new system is in place and all personnel are trained in its operation, we expect significant increases in the quality of the data. We agree with the recommendation of the auditor and are in the process of establishing reporting procedures for internal metrics. Again, as mentioned above, the department requires an updated CAD system with enhanced reporting capabilities along with other analysis tools to be available on a consistent basis. Moving forward the department will establish a quality assurance metrics plan for data review and analysis. There is a cadre of newly promoted district chiefs who will be trained on the procedures so they will be in compliance in anticipation of the new systems coming online.

TARGET IMPLEMENTATION DATE: The department estimates these enhancements would be in place in 10-12 months, barring any project delays on the CAD / AVL upgrades.

VEHICLE INSPECTION REPORTS

STATEMENT OF CONDITION: Inspections of apparatus housed on the vehicles have a daily form that is signed by the person performing the inspection and a weekly inspection of apparatus on Thursdays that is documented by a TFR checklist. In January 2020, the City implemented daily vehicle inspections city-wide. The inspections performed by TFR do not include all mechanical aspects of the city-wide vehicle inspection policy.

CRITERIA: City policy implemented January 2, 2020, states (page 1) daily inspections prior to and following use will be performed and documented using an approved Vehicle/Equipment Inspection Report form.

CAUSE: TFR management stated they contacted Fleet management for direction on inspections of different types of vehicles but have not yet received a response.

EFFECT OF CONDITION: Risk of patient and TFR personnel safety; risk of liability if injuries occur as a result of vehicles not being properly maintained.

RECOMMENDATION 2: In addition to apparatus inspections, TFR should either adopt the city-wide policy or update existing inspections to include all mechanical aspects of the city-wide policy. TFR should coordinate with Fleet to ensure proper implementation of all aspects of the city-wide mechanical inspections.

MANAGEMENT RESPONSE: Due to the vehicles of TFR being mission specific it was determined that a mission specific vehicle inspection check off form would be necessary. TFR management in coordination with City of Tampa Fire Fleet developed a Vehicle Check List to be completed everyday by all vehicle operators at the beginning of each shift. Employee numbers will be used as the signature of the driver of the vehicle to more easily identify who completed the inspection.

TARGET IMPLEMENTATION DATE: September 7, 2020. These checklists will be kept in a binder on the vehicle and made available for inspection when needed. In the near future, the Vehicle Check List will be incorporated into the Smart Sheet Electronic Logbook and digitalized.