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Volume IV, 2008 Fairfax County Fire and Rescue Department

Firefighters battle a three-alarm fire at Spring Hill Marriott Suites, a four-story hotel under construction, September 11, 2008, at 6065 Richmond Highway. Damage was estimated at $5 million. The cause of the fire is undetermined. (Photo by Chaplain Grant McIntosh.)

Ronald L. Mastin

From The Fire Chief . . .

"In my opinion the bottom line is this: we must work together in concert to weather this storm and truly focus on why we exist as an agency and for the community we serve 24/7."

The holiday season is upon us and it is a time to pause and reflect on the many blessings we have been afforded as we prepare to celebrate these occasions. While we are facing extremely challenging times in our county and Country, let's keep things in perspective and realize that working together on these issues will allow us to be successful regardless of the situation. This applies equally to the workplace and our personal wishes as well.

So with this in mind, many are asking what's next regarding Lines of Business (LOBs), EMS Redesign, promotions, and reductions in force (RIFs), etc. I will speak to each of these issues, but the real caveat is the simple fact that we have no definitive answers at this point in time. We presented our LOBs in September to the County Executive, the Department of Management and Budget (DMB), and the Board of Supervisors (BOS). As you recall, we had to identify a 15 percent reduction in our FY2010 budget in the amount of $26.7 million.

The LOB information was also made available to everyone for their review and FAQs are posted weekly. To date, no decisions have been made by the BOS on the final cut percentage or what the exact impact will be on the organization. The next step will involve a DMB meeting with the Deputy County Executive for Public Safety, Mr. Stalzer, to discuss the LOBs we presented. In the meantime we will continue to look at program areas we can manage more efficiently and welcome your suggestions.

What we do know is that since our LOB presentation we will have taken an additional 2 percent cut for a total of 3 percent in the current budget year, FY2009. To manage this $4.2 million dollar cut, we are not filling some positions, reducing training (i.e., NOVA Officer Training), and not offering incumbents the opportunity to pursue ALS certification at a projected cost of $1.8 million. We are, and must continue to look at other ways to manage this reduction in our budget as we are not yet halfway through the fiscal year.

I fully realize that during these difficult economic times, coupled with a furlough day during the holiday season, makes for a very stressful environment. Many have asked, "What can I do to help?" I believe there are several things that we can all do to help manage this. First and foremost is to continue doing what you all do each and every day: provide excellent service and foster good customer relations. Second, involve yourself in the business of the county and the Fire and Rescue Department so you have a good understanding of our vision, mission, core values, and LOBs. Don't perpetuate rumors or just pick a single item in our LOBs presentation to focus on without understanding how the items impact one another.

Ronald L. Mastin, *Fire Chief*
Dan Schmidt, *Editor*
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Fairfax County
Fire and Rescue Department
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Lastly, look at this as an opportunity to serve both our fellow employees and constituents in a more efficient manner.

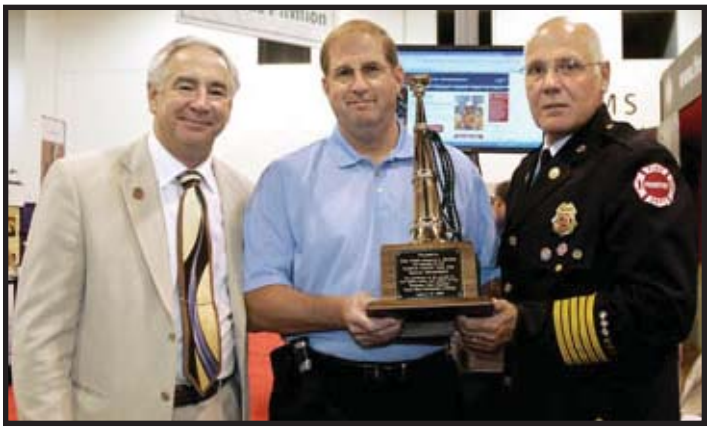
We will undoubtedly have some very tough decisions to make as we move forward. With our call volume continuing to increase, and our response time targets slipping, we must look at the impact of destaffing units, maintaining an adequate infrastructure, compensating our personnel, all within the fiscal parameters we are given to operate in. In my opinion the bottom line is this: we must work together in concert to weather this storm and truly focus on why we exist as an agency and for the community we serve 24/7. We have done this in the past and I am fully confident that we will once again be successful.

We have completed the officer training overview for the EMS Redesign and continue to move forward with the first phase scheduled for January 2009. Many thanks to everyone that contributed their input to this new service delivery model. I want to reiterate that as we move forward we will evaluate the success of the redesign and make the necessary adjustments. To that end, we will not abolish any positions or force existing EMS lieutenants to take the upcoming all-hazard tests. We will take a measured approach as outlined in the recent informational bulletin and do a thorough evaluation of the change to ensure patient outcomes do not suffer. Again, this is a major change, but one that I believe is essential for us to address the challenges we are facing in the EMS component of our organization.

As you can see, we have much going on in the county and the Fire and Rescue Department, but in spite of these challenges, each of you continue to do a great job each and every day. Whether it be the Fire Prevention Open House activities, the smoke alarm program on November 1, or the new sprinkler training lab, three deployments, the three people that were successfully resuscitated in one day, we have a great organization that we all can and should be proud of.

Thank you for your continued support and dedicated service. From my family to yours, we wish you a great holiday season. ❖

Chief Mastin Accepts 2008 Near-Miss Reporting System Safety Leadership Award



Chief Steve Westermann (left), 2007-2008 IAFC president, presents the 2008 Near-Miss Reporting System Safety Leadership Award to Chief Ronald L. Mastin of the Fairfax County Fire and Rescue Department. At right is the 2007 winner, Chief James Grady of the Frankfort Fire Protection District. The award recognizes Fairfax County Fire and Rescue Department for exceptional work to improve the National Fire Fighter Near-Miss Reporting System. This award is co-sponsored by the IAFC, the International Society of Fire Service Instructors, the Fire Department Safety Officers Association, and the IAFC Safety, Health and Survival Section.

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The "New" Danger in Fire Smoke

By Captain II Keith M. Ludeman
Battalion 2, B-Shift

Think back to your first day of Fire Science. For some that's way back, for others, just weeks ago. But if we were to ask you some simple questions about fire smoke, the odds are pretty good that you would give the same answers. What is the most dangerous component of fire smoke? Which toxic gas is the most monitored on the fire ground? What fire gas, if inhaled on the fire ground, can be treated with relative ease? The answer would typically be carbon monoxide (CO). These beliefs will injure or kill our members, and more readily, the residents we are sworn to protect.

So the question becomes, what is the most dangerous component of fire smoke? The "new" answer is hydrogen cyanide. We've always known about it, but it's never been a cheap toxin like CO has been. What do we mean by cheap? Carbon monoxide has great public relations. A by-product of incomplete combustion, explosive, toxic, easy to measure (go to any Home Depot for a cheap and effective monitor), easy to treat (quick trip to Mount Vernon's hyperbaric chamber and you'll be right as rain)…we know the drill. HCN (you don't even recognize the chemical symbol, do you?), on the other hand, needs a Madison Avenue campaign of epic proportions. It is not cheap. No simple effective monitor, no nice easy treatment (if you consider that most of the existing antidote kits have toxic side effects)…and hey, isn't it a Haz-Mat or WMD thing? What's that got to do with the fire ground?

Well, if you've been reading any of the trade publications over the last two years (Firehouse, Fire Engineering, JEMS, Fire Chief, to name a few), you might have seen that the times are a changing. Cyanide is in fact, the 800 pound gorilla we now ignore at our own peril.

The science behind fire smoke is showing us that what is killing the civilians on the fire ground is not necessarily carbon monoxide. Several notable incidents, Warwick, Manchester, Dupont Plaza Hotel, showed that an overwhelming majority of the fire victims had lethal levels of cyanide but sub-lethal levels of carbon monoxide. Many other large scale incidents show us that the victims had both toxic levels of CO and HCN. What does that mean? Even if we had treated the victims for CO poisoning (oxygen), they probably would have succumbed because of the cyanide.

So what's the solution? What makes HCN a cheap toxin now? A new antidote called the Cyanokit (chemical name, hydroxocobalamin). This new antidote is the powdered form of a precursor to Vitamin B12. What's that mean? It means that when it binds with cyanide in the blood stream it becomes vitamin B12. And if you have kids (or are just young at heart), that's part of your daily Flintstones chewable vitamin (except instead of little bit of it to make you strong and healthy when you grow up, this is a whole lot of it to make sure you don't die from the nasty stuff you inhaled at your last working fire). What's the downside of this drug? It will interfere with the hospitals ability to test your blood completely. That's because everything about you will turn red. Certainly this is much better than being dead.

Thanks to the extensive efforts by Lieutenant Marc S. Davidson, Fire and Rescue Academy, and Firefighter Medic Jeffrey J. Berrigan, Fire and Rescue Station 29, C-Shift, Fairfax County Fire and Rescue Department will join fellow fire departments in New York, Chicago, Los Angeles City, Boston (EMS), Salt Lake City, Nashville, and Kansas City, now moving forward with this treatment. We are also ensuring that we are prepared to not only take care of the residents we are sworn to protect, but of our own brother and sister firefighters.

The Cyanokits will be deployed on all seven EMS Supervisor's command vehicles. This will bring a total of four kits to each working fire, allowing for initial treatment of multiple victims. If more kits are needed, whether for other victims, or a second round of the drug as indicated for existing victims, then consideration should be given for calling an additional EMS Supervisor. Given the relatively new status of the Cyanokit, as a department, we will be conducting outreach efforts to our local and regional hospitals, as well as our Council of Governments and NOVA partners.

In closing, the whole issue of cyanide on the fireground should make us rethink how we operate. Air management and how we conduct overhaul must change. The Cyanokit is making us reevaluate our standard of care. Fire science won't ever be the same.

Additional information is available on the Intranet in In-Station Drill 2007-004 (Cyanide Poisoning from Fire Smoke Production). Web resources include:

http://www.cyanidepoisoning.org/pages/fire_smoke.asp

http://www.firerescue1.com/cyanide/articles/245307/

http://www.emsresponder.com/features/article.jsp?id=2392&siteSection=18

http://www.firehouse.com/interactive/calendar/featured/PFDCyanideReport.pdf

http://www.fireengineering.com/articles/article_display.html?id=251465

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Line Copy Deadline

The deadline for the next Line Copy is no later than February 15, 2009. Please submit articles or text to Dan Schmidt at Dan.Schmidt@fairfaxcounty.gov or Jackie Pitkin, Jacqueline.Pitkin@fairfaxcounty.gov

MDA Fill the Boot Campaign a Huge Success Despite Deployment

Thank you for making our MDA Fill the Boot campaign a huge success again this year. With your efforts and dedication we were able to top the $500,000 mark again this year. This is no small undertaking given the weather, deployment of our USAR Team, and the overall county activity during this time. I only wish you could see the smiles on the faces of the families and children that benefit so much from your efforts. This makes it all worth the time and effort that you put into this annual event.

I want to especially thank Acting Technician Joel J. Kobersteen, Local 2068, all of our staff, the retirees, Department of Public Safety Communications, and those that volunteered over the last five days. This was a great team effort and the dividends of working together for a great cause are quite evident. I am very proud of your efforts and the way you represented our organization.

Thanks again,

Chief Mastin

Fallen Firefighter Memorial Weekend

By Battalion Chief Alfred E. Mullins
Battalion 6, B-Shift

On October 5, 2008, firefighters from all over the United States gathered on the grounds of the National Fire Academy (NFA) in Emmitsburg, Maryland, to remember those who gave their lives in the performance of their duty. This year was especially poignant as we were paying tribute to the memory of Technician Kyle Wilson, Prince William County Fire and Rescue Department. This article is written from the perspective of the team of firefighters working with the Operations Section attending the memorial weekend.

The National Fallen Firefighters Foundation organizes the memorial weekend at the NFA each year during the first weekend in October. The foundation assists families of fallen firefighters and works hard to reduce fire service deaths each year. While we pay tribute to our lost comrades, the foundation has set forth 16 initiatives to help improve the safety and survivability of firefighters. Chief Ron Siarnicki (Retired), director of the foundation, works on the grounds of the National Fire Academy.

The memorial weekend is full of activities to help the families of the fallen firefighters. They are offered grief counseling and peer support, just to name a few. This all starts when they arrive in Frederick and are met and escorted by members of the foundation. Escorts are firefighters who volunteer to come to the NFA and assist the families in any way they can.

I have been fortunate to be a member of a team of firefighters from this department supporting the Operations Section of the "Memorial Command." Chief John McGrath, Raleigh Fire Department, North Carolina, was the Incident Commander for the weekend. The operations section chief was Ron Kantermann, a former fire chief, currently is the president of the National Fire Academy Alumni Association. Our team was assigned to the Operations Section and worked under the Operations Battalion, Battalion Chief Greg Bunch, Fairfax County Fire and Rescue Department.

When the team arrives on the campus of the NFA on Thursday, we hit the ground running. We conduct a preparation meeting with our colleagues from other jurisdictions providing support. Jurisdictions included: Summit, Bergen and Burlington, New Jersey, and Smithfield, Rhode Island. Additionally, we were assigned radio channels, given copies of the incident action plan, and exchanged information with other team leaders.

The real activity starts Friday morning; we meet at 7 a.m. at the command center and receive assignments for the day. One team is assigned to exclusively assist the foundation and spends the entire weekend in support. Other teams are

rotated through a staging area and are assigned tasks as they arise. Operations teams provide assistance to the logistics section and other functional areas throughout the day. Things usually end by 7 p.m.

Saturday starts early; teams are in staging by 7 a.m. Families start to arrive at the academy by 10 a.m. Weather is always a factor; this year the weather was pleasant. This is also the day members who participate in the ceremony practice for the big event. Honor guards, bagpipers, and firefighters who are part of the "Sea of Blue" practice several hours to ensure everything is ready for Sunday prior to the ceremony. It is always uplifting to hear the voice of Battalion Chief Brian Brendel, C-Shift, over the hundreds of bagpipers and drummers practicing. We also assist visitors, usually providing directions and helping older adults. Saturday night families meet at the Basilica of Saint Mary Ann Seton to attend the candlelight service in remembrance of those lost in the line of duty. Activities usually end at 10 p.m.

Sunday starts early with set-up and clean-up. Several thousand chairs need to be dried after the overnight dew. Books for the ceremony need to be assembled with their programs and distributed. Once the prep work is done, the teams get dressed in their Class A uniforms and placed throughout the campus to again provide assistance. Teams are kept on task and stand-by during the ceremony and assist visitors as they are provided lunch by the foundation at the NFA cafeteria.

I am proud to be part of the team from Fairfax County Fire and Rescue Department assisting the NFFF for the Memorial Weekend and thank the department for the opportunity. If you have not attended a memorial weekend, you should strongly consider doing so. This year's team consisted of Technician George E. Loayza, Fire and Rescue Station 21, B-Shift; Technician Annita L. Reynolds, Fire and Rescue Station 21, B-Shift; Technician Leo T. Sullivan, Fire and Rescue Station 29, C-Shift; Firefighter Mary Kate Costello, Fire and Rescue Station 29, C-Shift; and myself. I am very proud to pay my respects and help the families who "have given their last full measure of devotion." ❖

Virginia Task Force 1 Deploys to Haiti School Collapse

The 38-member Virginia Task Force 1 team searches for victims in Petionville, Haiti, following a school collapse, November 8, 2008.

Virginia Task Force 1, Fairfax County's Urban Search and Rescue Team(USAR) was activated by the United States Agency for International Development (USAID), Friday evening, November 7, 2008, and deployed to a school collapse in the Haitian town of Petionville, near the capital of Port-au-Prince. The 38-member team arrived in Haiti Saturday morning, November, 8, 2008.

The medium Type III team included: four search and rescue canines, search and technical rescue personnel, physicians, paramedics, engineers, other support personnel, and approximately 31,000 pounds of equipment and supplies. The task force will be working alongside a USAID Disaster Assistance Response Team (DART) when they arrived. The team is self-sustaining for approximately 14 days. ❖

When is a DUI like a Space Heater?

By Bill Prassad, Behavioral Health Coordinator
Health and Safety

We're at that time of year when news reporters do stories about the dangers of space heaters. In spite of this, every year in this country people are involved in potentially deadly fires involving those heaters. The same can be said about drinking and driving warnings during the holiday season.

A look at the statistics for emergency responders tells us in two of the last three years there has been an increase in the numbers of those involved in DUIs from October to January. The National Highway Traffic Safety Administration reported 663 alcohol related fatalities during the holiday period in the U.S. in 2006 among all drivers and passengers.

2006 U.S. Alcohol Related Fatalities
Thanksgiving.....267
New Year's Eve.....216
Christmas.....180

Holiday parties and celebrations mark Halloween, Thanksgiving, Christmas, and New Years. Now is the perfect time to sound the alarm and to take precautions:

- At social events, designate non-drinking drivers who can get everyone home safely
- Call a friend or family member for a ride if you have been drinking
- Keep a cab company telephone number in your wallet so you can call for a ride home
- As a party host, offer a variety of non-alcoholic drink alternatives
- Take the car keys away from friends and relatives who have had too much to drink

Before you imbibe and drive, ask a question: Is it worth risking your safety, the health of others, and jeopardizing your career? Virginia EMS regulations specify that EMS personnel may not act as an operator of an EMS vehicle if they have been convicted upon a charge of driving under the influence of alcohol or other drugs, convicted of a felony or assigned to any alcohol safety action program (ASAP) or driver alcohol rehabilitation program. Eligibility for reinstatement can occur only after five years. Fairfax County employment standards require all uniformed department members to be eligible to serve as an operator of an EMS vehicle.

The EMS regulation, like warnings about drinking and driving and the dangers of space heaters are not new, but each year many people place themselves in dangerous situations. Reporters will never be able to count the number of fires they helped prevent by doing space heater dangers stories. We won't be able to count the number of DUIs that were prevented by sharing this warning. We can only guarantee that remaining quiet would be a disservice to the men and women who wear the uniform. ❖

Line Copy can be viewed at http://www.fairfaxcounty.gov/fire

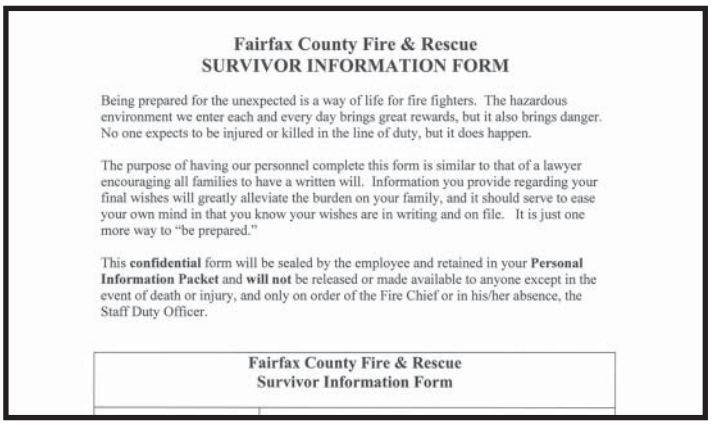
Survivor Information Form Is All-Important

Captain II Robert A. Konczal
Health and Safety

No, this is not about a reality show. This is real; real-real. This is about what happens after you die. Should something happen to you, on a call, on your way to work, on leave, at home, and you are mortally injured and die, what happens to your survivors? Some might say, "What do I care? . . . I won't be here!" Others might have a detailed plan down to the color of socks they want to wear for eternity. I believe most of us are in the middle somewhere. This is not a priority because it's something we do not want to think about or it's something we plan on doing . . . later. With this subject, many of us are procrastinators.

But the reality is, if it happened today, would the people closest to you be protected and would they know your final wishes? An informal poll, extremely unscientific, indicated the majority of firefighters asked if they had a will or other mechanisms in place should they die said they did not or their plans were not complete. The tragedy of 9/11 left unintentional damage to the families of the firefighters who died within the Fire Department of New York (FDNY). The majority of the firefighters killed at the World Trade Center and all nine of the Charleston firefighters who died on June 18, 2007, were without wills or other documents specifying final instructions or wishes. Some ex-wives of the dead firefighters became wealthy with insurance money because beneficiary information had not been updated in years.

If something as tragic as a line-of-duty death occurs, why would you knowingly leave your survivors with the burdens associated with funerals, finances and other legal matters that can be dealt with now, rather than if/when your death occurs. Gordon J. Graham's line "If it's predictable, it's preventable" holds water here. I predict one day you will die. You can prevent additional anguish with a little planning now.



Fairfax County Fire & Rescue
SURVIVOR INFORMATION FORM

Being prepared for the unexpected is a way of life for fire fighters. The hazardous environment we enter each and every day brings great rewards, but it also brings danger. No one expects to be injured or killed in the line of duty, but it does happen.

The purpose of having our personnel complete this form is similar to that of a lawyer encouraging all families to have a written will. Information you provide regarding your final wishes will greatly alleviate the burden on your family, and it should serve to ease your own mind in that you know your wishes are in writing and on file. It is just one more way to "be prepared."

This **confidential** form will be sealed by the employee and retained in your **Personal Information Packet** and **will not** be released or made available to anyone except in the event of death or injury, and only on order of the Fire Chief or in his/her absence, the Staff Duty Officer.

Fairfax County Fire & Rescue
Survivor Information Form

Sit down and discuss your wishes with your spouse. Work with a financial planner and determine needs. Consult with a lawyer and draw up a will. Consider the what-ifs if your spouse dies. The Florian Foundation was created post 9/11 and offers advice and other services to members of public safety to plan for untimely deaths. For more information visit www.florianfoundation.org/overview.html

An internal source required by the soon published Standard Operating Procedure 02.03.02, is the Survival Information Form. This document and the FRD-017 Survivor Information Form shall be reviewed and filled out at your annual physical at PSOHC. The completed form is sealed and secured in your medical file. The FRD-017 requires the member to fill out information concerning your next-of-kin, funeral pre-planning, specific arrangements, officiators of your service, special requests for your service and any personal requests or final instructions you would like to be carried out. Again, the purpose of this is to honor you and your final wishes and alleviate the burden on your family.

Please fill out the FRD-017 or update yours if necessary now or at your next physical. Consider the aftershock of one's death and the emotions of the days to follow. This document can make a world of difference to the ones that love you most, your family. ❖

Wellness Fitness Data Collection and Medgate

By Maria Teel
Health and Safety

The Joint Labor-Management Wellness Fitness Initiative (WFI) is a historic collaboration between labor and management for the purpose of improving the health and longevity of fire service employees. More specifically, the WFI will help standardize the occupational health care of firefighters and will allow pooling of health outcomes data. To better understand some of the health concerns (heart disease, infection diseases, and certain cancers) associated with employment in the fire service, studies will be done on aggregate (de-identified) health information.

The Fairfax County Fire and Rescue Department, in conjunction with International Association of Fire Fighters (IAFF) Local 2068, have been key contributors in the design and ongoing evolution of the WFI. Other municipalities and local unions involved in the WFI include:

- Austin, TX / IAFF Local 975
- Los Angeles Co., CA / IAFF Local 1014
- Calgary, ALB / IAFF Local 255
- Metro Dade Co., FL / IAFF Local 1403
- Charlotte, NC / IAFF Local 660
- New York City, NY / IAFF Local 94/854
- Phoenix, AZ / IAFF Local 493
- Indianapolis, IN / IAFF Local 416
- Seattle, WA / IAFF Local 27

The WFI, now in its second revision, provides a detailed programmatic outline of a comprehensive occupational health program. The WFI provides information on fitness evaluation, medical evaluation, rehabilitation, behavioral health, cost justification, implementation, and data collection. As part of the WFI, we are required to collect data and submit depersonalized data to the WFI database. This database will be made available to researchers from around the U.S. and Canada to study the medical concerns associated with firefighting.

The Medgate Medical Information System (MIS) will be instrumental in the collection of medical data. We will collect data by 1) interfacing with medical equipment in the Occupational Health Center (OHC), 2) direct transfer from our clinical lab, and 3) uploading the results of medical surveys and physical exams. The data collected by this software will assist in developing programs and procedures that can help our employees work healthier and safer.

Medgate is the industry's most advanced Occupational Health & Safety Software (OH&S). This Canadian software firm has nearly 25 years of experience working with workplace health issues.

Some of Medgate's government clients include:

- U.S. National Aeronautics and Space Administration (NASA)
- Centers for Disease Control and Prevention (CDC)
- Federal Bureau of Investigation (FBI)
- U.S. Army Corps of Engineers
- Library of Congress
- Smithsonian Institution
- U.S. Bureau of Engraving and Printing
- Washington Savannah River Company
- United Nations (UN)
- United Nations High Commission for Refugees (UNHCR)
- Food and Agriculture Organization of the United Nations (FAO)

Medgate Software provides health and safety professionals with the tools and technology to safeguard and improve the health and safety of our workforce. Our version of Medgate includes the following modules:

Clinic Visits: The Clinic Visits module will allow us to record all public safety occupational health center's visits, clinic vision reasons, diagnoses, procedures performed during those visits, and medical chart notes.

Employee Medical Records: The Employee

Medical Records module combines medical components of an employee's chart into one consolidated area of the software.

Scheduling/Surveillance: The Scheduling Module manages time-scheduled events, such as health center visits and the reason for the visit. We will be able to create comprehensive reports and set-up recalls in support of medical surveillance programs.

Audiometric Testing: Audiometric Testing is used to store audiograms (hearing tests) for employees and to compare those audiograms to previously entered baseline tests. Audiometric testing also screens applicants to determine if they meet the minimum medical standard. This module includes an equipment interface to transfer audiograms directly from an audiometer, using a serial interface. It identifies patterns in hearing loss for specific occupations and develops hearing conservation plans to minimize hearing loss within the workforce.

Vision Testing: Vision Testing stores employee vision tests and compares the results with (user-defined) standards based on the employee's occupation. Vision testing also screens applicants to determine if they meet the minimum medical standard. Data captured include: test date, name of practitioner, type of correction (if applicable) and last prescription date.

Questionnaires: The Questionnaire Module allows us to create various types of questionnaires including patient satisfaction surveys, patient reported medical information, and the WFI questionnaire patient response information. This module allows custom data fields to be collected which are not present in the stock Medgate application.

Immunizations: This module permits tracking of immunizations and their related recalls. It includes features for automatic generation of recall letters and specific fields for recording of TB test results. Batch Immunization recall letters can be printed or emailed directly through the system. This ensures timely follow-up so you get the appropriate vaccinations to address occupational risks.

Clinical Testing: Clinical test results will be entered by means of direct transfer from the Inova Health System clinical laboratory. This process uses standard protocols and reduces human error associated with data entry.

Pulmonary Function Testing: This module records pulmonary function test results through a direct interface with a spirometer. The pulmonary function testing helps evaluate patients after an occupational exposure related to lung disease.

Respiratory Fit Testing: This module records respiratory fit test results through a direct interface with our PortaCount Respirator Fit Tester. This module will document OSHA compliance for multiple public safety agencies that use a variety of respirator apparatus.

In the future, during your annual exam, you will be asked to complete a new questionnaire which includes questions about demographics, illness/injury experience in the past year, and tobacco and alcohol use. Other questions include responses pertaining to fitness habits and clinical symptoms.

Fairfax County has taken the lead within the WFI to complete the data collection process and was recently awarded an $850K grant (in conjunction with the University of Maryland School of Medicine) to complete a key phase of the data collection process. In addition, there is a concerted effort between the Health and Safety Division and the OHC staff to complete implementation of Medgate and integration of the WFI data dictionary.

Finally, the clinical program implemented in the OHC, which is modeled after the WFI protocols, is considered the most compliant program within the 10-city WFI community.

The data collection from all the 10 participating cities will be used for surveillance and to identify risk factors. The goal is to turn information into health.❖

Sources and Special Thanks:
http://www.iaff.org
http://www.medgate.com
Jim Brinkley, Director of Occupational Health and Safety, International Association of Fire Fighters
Dr. Donald F. Stewart, Medical Director, Public Safety Occupational Health Center
Dr. Mary Anne Alexander, Deputy Medical Director, Public Safety Occupational Health Center

37 Years of Emergency Medical Services

By Captain II Richard J. Yuras
Lieutenant Thomas M. Connolly
Fire and Rescue Academy

The Fairfax County Fire and Rescue Department has a 37-year history of delivering quality pre-hospital emergency medical care to the residents of Fairfax County. In 1976, the first EMS five-year plan was implemented and ten Mobile Intensive Care Units, (MICUs), were placed in service throughout the county. The units were staffed with a three-person crew, consisting of a minimum of two cardiac care technicians and one EMT-A firefighter. Over the years, additional three provider units were placed in service to meet the increased call volume. The EMT-A firefighter was replaced with the EMT-Basic (EMT-B) certified firefighter.

The EMT-B firefighters were not solely drivers, but considered to be a vital member of the advanced life support team. These EMT-B firefighters participated in many ALS in-station drills, often initiating the request to receive specific training. The EMT-B firefighters' basic medical qualifications and abilities were greatly enhanced by this training. This training significantly enhanced patient care when EMT-Bs were assigned to a medic unit or riding on the ambulance. Their assessments, treatments, and medical communication skills provided a smooth transition of patient care to incoming ALS units while enabling the firefighter to recognize critical patients and initiate medical care.

The EMS Task Force Reorganization Plan reallocated one of the three ALS providers from the medic unit and placed that provider onto the engine company. The four-person ALS engine company ensured the arrival of ALS patient care within the six minute department goal and enabled the department to meet NFPA staffing guidelines. The ALS engine company concept slowly transitioned to provide a smooth and effective medical delivery system.

The Fire and Rescue Department's (FRD) Strategic Plan identifies the need of further examining the EMS delivery service and redesign of the system to meet the current needs of the community. The FY2008-2010 Strategic Plan Objective 1.1 placed EMS restructuring as the number one priority. The redesign proposal called for 14 ALS transport units to maintain staffing with two ALS providers. All remaining transport units would be staffed with the 1+1 concept, one ALS provider and one EMT-B firefighter. ALS Engine Company staffing did not change. Under the 1+1 system, the EMT- B firefighter again is included in the ALS transport unit's minimum staffing. All FRD EMT-B providers will take on an expanded role under the redesigned plan, including practicing those EMT-B skills that have unofficially been branded "ALS ONLY" over the past eight to ten years.

One of the challenges facing the new EMS delivery service rests with the EMS Training Division's design of an "All-Providers" training program. Two main focal points of the program are elevating the EMT's pre-hospital cognitive knowledge and building competency in psychomotor skills, including the unofficially classified "ALS ONLY" skills.

The All-Provider training will follow the same methodology used in transitioning the Basic Life Support transport units to Advance Life

Support units, a manageable modular program. The didactic portion of the training will heavily rely upon the training matrix and the e-learning platform initiatives. The cognitive learning objectives will focus on understanding the physiology of why the procedure is beneficial to the patient, the patient's presentation of signs and symptoms (including acute and chronic medical conditions), and recognizing the positive effects or wanted end result. The EMT will be provided with knowledge to be aware of and recognize untoward actions and side affects that certain procedures may have on the patient. An example of this decision making is as follows: when properly applied to the patient, suctioning will clear a patient's airway. However, prolonged airway suctioning may cause hypoxia, resulting in cardiac irritability, a change in the patient's mental status, and stimulate a parasympathetic response, thus causing a decrease in the heart rate and blood pressure.

The psychomotor skill sets necessary for correct patient suctioning as well as other All-Provider procedures will be emphasized through in-station drills delivered in the monthly training matrix training content, battalion drills conducted by EMS supervisors, and battalion training officers. The EMS Training Division's field training staff utilizing the mobile training lab, will be complementing the in-station and battalion drills. Another key for delivering quality training is the after incident critique. The critique must be conducted with all providers, not just the transport crew. Active participation in the "All-Provider" training will assist in promoting teamwork across "unit specific function" boundaries, as well as enhancing the confidence of EMT's to render quality patient care.

The department's vision is to diversify from the "old school" single function EMS delivery service to a new era of an all-hazards response. The old two-tier EMS delivery system is being retooled into a single tier system that will provide the optimum allocation of FRD personnel and quality pre-hospital medical care to the community. ❖

Governor Kaine and Cabinet Visits VATF-1 and Academy

Virginia Governor Timothy M. Kaine uses some of Virginia Task Force 1's equipment during a visit October 14, 2008.

Governor Timothy M. Kaine and members of his Cabinet visited Virginia Task Force 1 (VATF-1), Fairfax County's Urban Search and Rescue (USAR) Team, Tuesday, October 14, 2008, at the Fairfax County Fire and Rescue Academy, 4600 West Ox Road, Fairfax. The visit included a presentation, equipment displays, and various demonstrations by team members.

Virginia Task Force 1 is one of two USAR teams in Virginia, and partners with the U.S. Department of Homeland Security and the Federal Emergency Management Agency (FEMA) for domestic operations and deployments, and the United States Agency for International Development (USAID) for international deployments. The team recently returned from Texas after assisting residents and government officials in the aftermath of Hurricane Ike. ❖

Mobile Training Unit Receives Graphics Award

The department's mobile training unit placed second in two separate vehicle graphics contests; the first contest was sponsored by SIGNWEB and the second by BUSRide.

Understanding Professional Standards

By Guy Morgan
Office of Professional Standards

The Office of Professional Standards was established in 1991 to ensure integrity when investigating allegations and complaints of misconduct by employees and volunteers. Professional Standards replaced Internal Affairs in a departmental reorganization.

Investigators are responsible for fairly, promptly, and thoroughly examining allegations in determining whether misconduct actually occurred, if disciplinary action is warranted, and whether existing policies, procedures, and training are adequately addressed.

The United States Supreme Court ruling in the earlier part of the last century, held that public servants hold a unique position of public trust and responsibility, above what is expected from the ordinary citizen. As such, this inherent public trust mandates a higher standard of integrity, exemplary conduct, and honesty from every public servant. Therefore, every public safety agency has an obligation to examine an employee's behavior and suitability for continued employment—thus, Professional Standards.

Upon receiving a complaint of alleged misconduct whether by an ordinary citizen, another fire and rescue department member, or other sources, Professional Standards meets with the Fire Chief or Assistant Chiefs, to apprise them of allegations and to receive authorization and guidance. Professional Standards coordinates and exercises supervision over the administrative investigation, and may also initiate a criminal investigation if the complaint warrants criminal charges. Some ordinary incidents of misconduct include: violations of state or local laws, statutes, ordinances, standard operating procedures, departmental rules and regulations, or standards of conduct.

If alleged transgressions do not rise to a significant level of impropriety, they will not be investigated. Sometimes minor misdeeds are referred to the appropriate authority in the chain of supervision and are resolved there. Generally, however, the seriousness of the allegations determines whether Professional Standards becomes involved.

All employees have protection established under Virginia law, referred to as procedural guarantees. In short, these protections govern where the employee is interviewed, how notified, reasonable time, duration, breaks, and prohibitions against offensive language, inducements, threats, or retaliation.

The employee is generally given advanced written notice in sufficient detail outlining the allegations, directing them to report for an initial interview. A minimum of five days notice is mandated unless there is a "clear and compelling need" to waive this protection. Nothing precludes the employee from waiving the waiting period and agreeing to an immediate interview.

Since the majority of these investigations are strictly administrative in nature verses criminal, all attorneys, supervisors, chaplains, and union representatives are excluded.

The employee's responsibility is to cooperate fully and answer all pertinent questions truthfully and completely. Employees do not have the right to refuse to answer questions concerning their performance of duty. If an employee refuses to answer, is untruthful, withholds or conceals information, they may be subject to additional disciplinary action.

Due to the nature of administrative investigations, where answers are compelled, nothing an employee says can be used against

them in any subsequent criminal prosecution. This is a Fifth Amendment protection established in a 1967 court case.

Until the completion of the investigation, many employees are placed under a temporary Administrative Confidential Warning also know as a "Gag Order." This restricts employees from discussing the investigation with anyone connected to the case. However, employees are never excluded from discussing these matters with an attorney or union representation. This prohibition is designed to reduce coercion with other witnesses and limits complicity.

After completing interviews and gathering facts, an executive finding report is prepared for the Fire Chief and Assistant Chiefs. Outlining the investigation and drawing conclusions, internal investigations are classified in any of these four categories based on the preponderance of credible evidence:

- Unfounded; the allegation is false.
- Not sustained; there is insufficient evidence either to prove or to disprove.
- Exonerated; the incident occurred, but the actions taken were lawful and proper.
- Sustained; the allegation is supported by a preponderance of credible evidence.

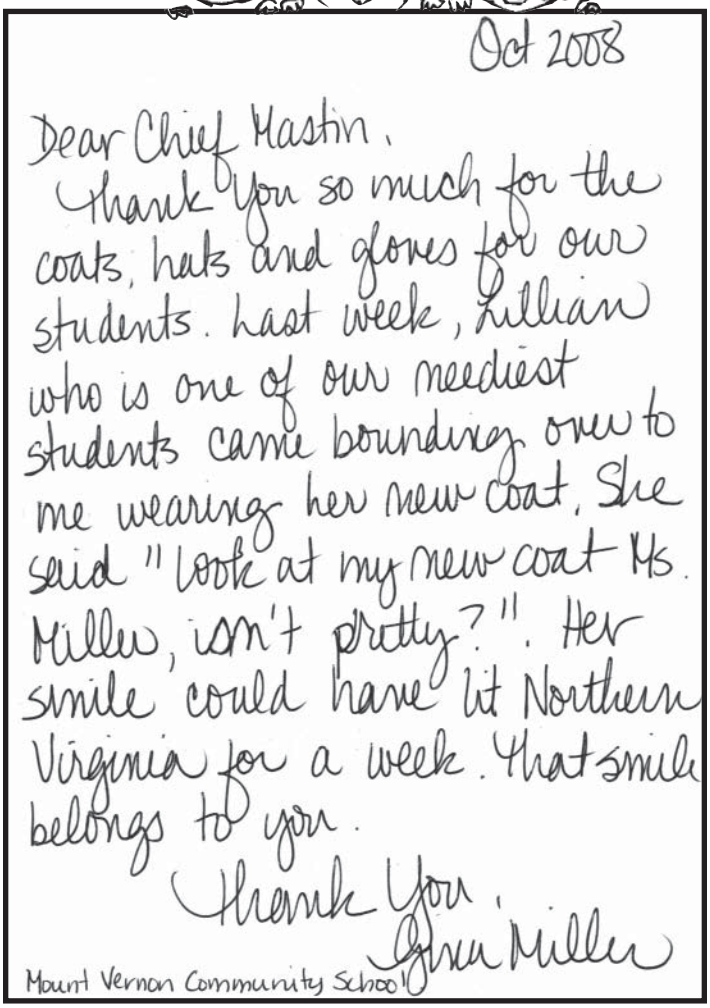
Frequently, investigations may have one or more classifications, largely dependant on the number of issues investigated.

Professional Standards is removed from all disciplinary actions and decisions. Discipline is primarily a personnel matter; they are confidential and generally not made public.

Over the last 15 years, there have been 587 internal investigations conducted, averaging about 40 per year, with sustained findings in approximately 50 percent of the cases. During the past eight years, sustained investigative findings percentages have ranged from a low of 35 percent to a high of 64 percent with an overall rate just above 50 percent. Most complaints are investigated in July and August. Unfortunately, some sustained findings are extremely serious matters, but many are minor departmental rule and regulation infractions.

With the fire and rescue department employing just over two thousand members, acceptance and compliance concerning rules and regulations is functioning well. ❖

A Big Winter Coat Thank You From Mount Vernon Community School



Oct 2008

Dear Chief Hastin,

Thank you so much for the coats, hats and gloves for our students. Last week, Lillian who is one of our neediest students came bounding over to me wearing her new coat. She said "Look at my new coat Ms. Miller, isn't pretty?". Her smile could have lit Northern Virginia for a week. That smile belongs to you.

Thank You,

Lynn Miller

Mount Vernon Community School

Hot Shots

Firefighters arrived on the scene of a laundromat fire, 8796 Sacremento Drive, September 24, 2008. With heavy fire coming from the roof of the one-story building firefighters called for a second alarm to include an additional hazardous materials response team bringing over 70 fire and rescue personnel to the scene. Damages were estimated at $2.5 million. An electrical anomaly involving an extension cord from an outlet in an office caused the fire.

A smoke alarm alerted the occupants of a two-story, split-level home at 5936 Oak Leather Drive, October 14, 2008. A trapped occupant in a second floor bedroom was rescued by firefighters using ground ladders and a second occupant escaped without assistance. Both occupants were transported to Inova Fair Oaks Hospital for non-life threatening injuries. Damage was estimated at $60,000. Fire investigators determined that a space heater too close to combustibles caused the fire.

Firefighters encountered fire and smoke coming from the roof and attic of the barn-style Chantilly National Golf and Country Club, 14901 Braddock Road, October 15, 2008. Damage was estimated at $1.5 million and the cause of the fire was accidental, an electrical anomaly in the second floor dining room caused the fire.

Firefighters battle a three-alarm fire at Spring Hill Marriott Suites, a four-story hotel under construction, September 11, 2008, at 6065 Richmond Highway. Firefighters fought the fire from a defensive mode, protecting nearby exposed buildings including other hotels and an apartment complex. Damage was estimated at $5 million. The cause of the fire is undetermined.

Keeping Pumpers and Firefighters Safer

By Battalion Chief Danny Gray
Health and Safety

The fire engine or pumper is considered the perennial "workhorse" within the fire service fleet when it comes to number and types of emergency responses.

The engine is the apparatus that goes out the bay door most frequently, providing an "all-hazards" response and service to our residents. This unit responds to all emergencies: structure fires (residential and commercial), medical events (cardiac arrests, shortness of breath, and other illnesses), vehicle accidents, trench collapses, hazardous materials events, and all public service requests. It is truly the workhorse and backbone of what emergency service is all about.

Fire engines are the workhorse of the fleet in an all-hazards department.

There continues to be an increase in department vehicle accidents over the past three years (see box below); however, procedural changes for reporting accidents have remained the same during this period. During the last twelve months, the department responded to 91,801 emergency calls. A breakdown of the number of emergency calls includes 71,157 (65 percent) as pumper responses—thus, a real workhorse. Last year, there were 92,345 calls for emergency service with 73,992 (68 percent) as pumper responses. In 2006, there was 91,139 calls for service with 72,680 (66 percent) as pumper responses.

Numerous variables and other contributing factors must be taken into consideration when reviewing this data. The important factors include: population, traffic, weather, time of day, hour of shift work, adequate operator training, front-line or reserve vehicle, vehicle specifications, and others.

The department has not taken this increase in accidents lightly. Senior leadership has committed to reducing vehicle accidents by recently creating a dedicated Driving Training Program Coordinator, assigned to the Fire and Rescue Academy. The position will assist everyone (at all different levels) to help ensure a positive outcome when driving or operating a vehicle or apparatus. ❖

Breakdown of Pumper Vehicle Accidents by Classification

	Class	9/05-8/06	9/06-8/07	9/07-8/08
1	Employee at fault with no contributing factors	15	14	22
2	Employee at fault with contributing factor	5	3	6
3	Employee not at fault, but could have used better judgment to prevent the accident	3	5	7
4	Employee not at fault and did all he or she reasonably could do to prevent the accident	9	10	7
5	Involved unit parked without a driver or had no driver assigned	1	4	8
	Total	33	36	50

2008 Officer Development School Emphasizes the All-Hazards Officer

By Captain II Elton N. Wright
Fire and Rescue Academy

The recently conducted (September 2008) Officer Development School received rave reviews and broke new ground by providing a program geared specifically toward the "All Hazards Officer." One student reported that this two week program . . . " was fantastic from start to finish. Everyone in the department can benefit from this training." This class was comprised of 28 uniformed personnel from the rank of Technician to Captain I.

The objective of the All Hazards Officer Development School was to deliver a high quality program concentrating on education, training, mentoring, and job experience. The overall goal was to build upon the students' existing knowledge, skills, and abilities to help create more confident and well prepared individuals who are ready to take on the duties and responsibilities of a front-line officer.

The two-week course could not have been possible without the support of the Fire Chief, senior staff, the planning and coordination of field training, and the host of experienced and dedicated instructors who taught each class. Future concepts of this course will continue to grow and develop to meet the needs of the fire service and the dynamic roles and responsibilities of the "All Hazards Officer."

It is a well known fact that heart disease and heart attacks are the number one killer of firefighters, as evidenced by the 2007 National Institute for Occupational Safety and Health (NIOSH) Alert, Preventing Firefighter Fatalities Due to Heart Attacks and Other Sudden Cardiovascular Events; therefore, to start the program, the focus was on physical fitness. The fire service requires you to be prepared both mentally and physically at all times. To emphasize the importance of exercising, each day the class actively participated in physical training. In addition, a presentation on motivation and strength conditioning was delivered to the group of students, which served not only as a form of team building but also emphasized the importance of cardiovascular conditioning.

The two-week curriculum focused on station management and the important role the officer plays in fostering a healthy work environment. The position of the officer as the formal leader requires taking responsibility for individual actions, and the actions of the personnel on an officer's unit or shift. Time management was studied and tools to manage time such as preparing daily, weekly, and monthly schedules were reviewed. The class used scenarios and group discussion to address the best way of dealing with various personnel issues.

The next phase of the course focused on being "combat ready," involving the fundamentals of having your gear ready, knowing where all the equipment is on your unit and how it operates, and being familiar with your response area. The students learned that developing these habits early and often pays huge dividends at the receipt of an alarm. As a direct result, the officer is able to focus on the incident rather than fumbling through the street book for information or getting dressed in their Personal Protective Equipment (PPE) while enroute to a call because of poor planning.

Clear and concise communication is important for daily station management and is absolutely critical during emergency operations. Learning to remain calm while effectively communicating over the radio during the heat of battle requires

practice, it just doesn't happen. The class had the opportunity to hear from a uniformed (UFO) fire officer and a Department of Public Safety Communications (DPSC) supervisor. The discussions demonstrated proper radio communications, what DPSC needs to know, and what may constitute ancillary radio traffic. The UFO offered tips for adding on to calls, mutual responses, and how to contact the Fire Marshal's office, Investigations, and Systems Branches.

An interactive class which discussed EMS issues for the front line officer was provided, it explored and examined the role and responsibilities of the EMS supervisor and what to expect from these supervisors on emergency incidents and as part of the Battalion Management team. Also explained and reviewed was how the ALS provider performs when riding as the Engine OIC, tips for dealing with DNR's, patient refusals, emancipated minors, and suspected child/elderly abuse.

The class was given an in-depth presentation on how building construction affects decision making on the fireground. Students performed an exterior construction size-up, and decided where the various rooms may be located inside a structure. The topics also covered: the importance of taking a lap to assess conditions on all sides of a building; the vinyl siding controversy, how much does it contribute to fire spread; and the significance of sweeping the siding to prevent vertical fire spread prior to making entry.

There were several days devoted to engine company operations, crew resource management and decision making, and applying fire ground strategies. Engine company operations examined the multiple duties of the engine company from taking a lap, giving a radio report on-scene, a situation report, and the command statement. Crew resource management provided advice for officers as to how best allocate their crew and other resources at various types of incidents.

A day of survival skills provided the demolition portion of the training. Put another way, students get to break stuff. The class spent an afternoon at an acquired structure where they performed team building survival skills. The activities included: tag line search, breaching walls, cutting roofs, removing a downed firefighter, standard evolutions, and airway management. Another important part of the course focused on case studies and near miss reports and what learning tools they provide. The overall objective of this training reinforced that firefighters should utilize situational awareness and best practices to avoid getting into a dangerous Mayday situation.

The final stage covered in the class involved "putting it all together" with fire studio scenarios, "go or don't go risk benefit analysis," and best practices to mitigate various incidents. Incident Command aspects of fireground operations provided each participant an opportunity to use the command board to track resource assignments and accountability. There was plenty of group discussion during this well received topic -- the highlight of the class. ❖

Fire Alarm and Sprinkler System Training Laboratory Grand Opening and Ribbon Cutting

Deputy Chief Dereck A. Baker, Fire Prevention; Melvin Byrne, Division Chief, Virginia Department of Fire Programs; Fire Chief Ronald L. Mastin; and Douglas E. Turner, Fire Inspector II, cut the ribbon to officially open the Fire Alarm and Sprinkler System Training Laboratory at the Burkholder Building in Fairfax, Virginia, Friday, October 31, 2008.

EMS Quality Management Improvement Within the Fire and Rescue Department

Beth Adams, Quality Manager
EMS Administration

Given the number of questions we've recently received, it seems that an overview of what's going on in the Quality Management Section is in order.

Who We Are

Staff in the Quality Management Section includes:

Beth Adams, Quality Manager
Maura Ardike, Management Analyst I
Lieutenant Laurie Byrne, ePCR/HIPAA Coordinator
Technician Brian Edmonston (light duty)

What We Do

The Quality Management Program was established in 2002 to develop a system-wide process for evaluating the delivery of emergency medical service provided by fire and rescue departments, in order to foster continuous improvement in performance and quality patient care by defining standards, evaluating methodologies, and utilizing the evaluation results for continued system improvement. This program has established prospective, concurrent, and retrospective mechanisms to ensure that the highest quality of prehospital care is consistently and compassionately delivered to the residents and visitors of Fairfax County.

Who We Serve

Primary internal customers: EMS Deputy Chief, Operational Medical Director, EMS Battalion Chiefs, and EMS Field Supervisors, as well as Fire Chief, Assistant Chief-Operations, Operational Shift Deputy Chiefs, Deputy Chief–Training, and Director of EMS Training.

Primary external customers: Northern Virginia Regional EMS Council, Fairfax County Health Department and Fairfax County Public Schools, Virginia Office of EMS, and the regional medical community.

Why We Do It

§ 12 VAC 5-31-600 mandates that each licensed EMS agency have an "ongoing Quality Management (QM) program designed to objectively, systematically, and continuously monitor, assess, and improve the quality and appropriateness of patient care provided by the agency. The QM Program shall be integrated and include activities related to patient care, communications, and all aspects of transport operations and equipment maintenance pertinent to the agency's mission." This section of the Virginia Administrative Code was established into rule in 2003.

What Are We Working On

Current ongoing/continuous reviews:

- Cardiac Arrest Study – utilizes the Utstein template (recognized international standard)
- Code 1 interfacility transports
- Procedure tracking for low frequency, high risk therapeutic interventions for advanced airway management, vascular access, and advanced cardiac life support (defibrillation, pacing) by agency and individual

Ongoing/periodic reviews:

- Monitoring service delivery utilizing user-developed quality indicators for frequently encountered patient chief complaints:
  - Acute coronary syndrome/STEMI
  - 'Code Blue'/major system trauma
  - Respiratory distress
  - Diabetes
  - Isolated extremity injury
  - Pediatric care

Episodic reviews based on QI inquiries
Ad hoc requests:

Northern Virginia EMS Council Performance Improvement Committee initiatives: ETI, STEMI, Stroke, Pain Management

External non-EMS community initiated requests: 'Falls' to Healthplex, destination decision-making, EMS response to Fairfax County public schools

Proposed QI initiatives for 2009 and the EMS Redesign implementation:

- Time to arrival of ALSFR and ALS transport – note: currently 'stop clock' on arrival of 1st ALS on scene
- On scene times: STEMI, trauma-compare Code Blue (physiologic signs) vs. Code Yellow (mechanism of injury)
- Aeromedical utilization: Compliance with transportation decision making criteria? Destination? "Contact time"? Time saved?
- Correlate care to older adults (or other LSE targets) or targeted facilities – e.g., stroke
- Availability of "first due" transport unit
- Expand NFPA tracking re: ALS transportation on scene within 9 minutes – break out: < 5, 5-7, 7-9 and > 9 minutes
- Frequency of 'pulling' ALS provider from engine: pre/post transition
- Evaluate the impact of significant events on target standards
- Such as impact of "condition 2" on response times or during 2nd and 3rd alarm events
- Significant event triggers for MPI/MCI response – e.g., 9/24/2008 - fire @ dialysis center – employed Medical Ambulance Bus. Triggers for post incident analysis? Report mechanism?
- Monitoring use of new clinical care initiatives: CyanoKit use (demographics, clinical indications for use, destination, outcomes)

We welcome your comments and suggestions. Send them to beth.adams@fairfaxcounty.gov ❖

Electronic Patient Care Reporting: Gone Live and Moving Forward

Lieutenant Laurie Byrne
EMS Administration

When training began in March 2008, we had high hopes to have a "rolling go-live." Well, that didn't happen exactly as planned; however, we did begin training in March and providers began using the tablets. Our "rose colored glasses" view of go-live was tempered by several issues: fax server issues, printing issues, more printing issues, and software configuration issues. There were times when it seemed Electronic Patient Care Reporting would never be launched.

However, providers persevered through the shadowing, while fire department Information Technology (IT) worked countless hours to smooth out the various printing and server issues. In the end we succeeded, because working together, the fire department did what we do best, "dig in and make it happen."

On October 1, 2008, the goal was realized.

As stated in IB #2008-143, we ran 3,500 calls in the first 30 days with only 13 missing patient care reports. That is a remarkable statement of success. We should be extremely proud of this accomplishment. The project has been a team effort. Fire IT, EMS Administration, Operations, and field providers all contributed to the success of this program.

With this success in mind, we need to continue to refine our documentation. Narratives are an area where we need improvement. As you complete each report, you should ask yourself, "If I am called into court five years from now to testify about this call, have I provided a clear, concise, comprehensive, and cogent picture of what happened?" A patient's name, address, and some vital signs won't be all that you need should that day arrive.

We have provided many tools for users to refer to when they need a little extra guidance. There is an online User's Guide, a Resource Group member on every shift, and I continue to welcome your questions, comments, suggestions, and complaints. ❖

Large Loss Fire Investigations

Date: 8/2/2008 **Box:** 10-94 **Address:** 5901 Columbia Pike **Type:** Residential
Cause: Accidental **Value:** $95,775 **Loss:** $75,000 **Status:** Closed

Date: 8/5/2008 **Box:** 19-30 **Address:** 9839 Hagel Circle **Type:** Residential
Cause: Incendiary **Value:** $302,055 **Loss:** $75,000 **Status:** Closed

Date: 8/5/2008 **Box:** 22-27 **Address:** 6700 Metropolitan Center Drive **Type:** Residential
Cause: Accidental **Value:** $55,000,000 **Loss:** $50,000 **Status:** Closed

Date: 8/22/2008 **Box:** 11-41 **Address:** 3703 Trigger Court **Type:** Residential
Cause: Accidental **Value:** $309,000 **Loss:** $80,000 **Status:** Closed

Date: 9/1/2008 **Box:** 32-04 **Address:** 5671 Roberts Parkway **Type:** Structure
Cause: Incendiary **Value:** $70,000 **Loss:** $70,000 **Status:** Open

Date: 9/8/2008 **Box:** 09-42 **Address:** 7422 Fordson Road **Type:** Residential
Cause: Accidental **Value:** $357,020 **Loss:** $100,000 **Status:** Closed

Date: 9/11/2008 **Box:** 11-92 **Address:** 6065 Richmond Highway **Type:** Commercial
Cause: Under Investigation **Value:** $5,000,000 **Loss:** $5,000,000 **Status:** Open

Date: 9/15/2008 **Box:** 22-00 **Address:** 6828 Ridgeway Drive **Type:** Structure
Cause: Accidental **Value:** $100,000 **Loss:** $60,000 **Status:** Closed

Date: 9/24/2008 **Box:** 24-02 **Address:** 8796 Sacramento Drive **Type:** Commercial
Cause: Accidental **Value:** $4,000,000 **Loss:** $2,500,000 **Status:** Closed

Date: 9/30/2008 **Box:** 05-93 **Address:** 4311 Dubois Street **Type:** Residential
Cause: Accidental **Value:** $525,540 **Loss:** $60,000 **Status:** Closed

Date: 10/14/2008 **Box:** 32-04 **Address:** 5936 Oak Leather Drive **Type:** Residential
Cause: Accidential **Value:** $454,365 **Loss:** $50,000 **Status:** Closed

Date: 10/21/2008 **Box:** 22-22 **Address:** 8120 Sleepy View Lane **Type:** Multiple Vehicle
Cause: Incendiary **Value:** $56,265 **Loss:** $56,265 **Status:** Inactive

Dear Chief Mastin,

Thank you so much for your generous donations to assist our children with staying warm this winter. The coats were so beautiful and the children have been very excited to see a new and stylish coat that is just for them.

This is my eighth year as a social worker with Fairfax County Public Schools and this is by far the most difficult year for a lot of our families financially. Having a new and warm coat makes a big difference in their lives and that of their children.

Thank you again and have a wonderful holiday season!

Sincerely Shannon Cassidy Reed
School Social Worker
Irving Middle School and Keene Mill Elementary School

Community Outreach Program Highlights

Personnel from Penn Daw Fire and Rescue Station 11 and supporting volunteers pack up and distribute coats to schools and homeless shelters in the department's third annual winter coat drive.

Winter Coat Drive A Winner

For the third year Fairfax County Fire and Rescue Department, Progressive Firefighters, Inc., and Professional Firefighters and Paramedics, Local 2068, distributed new winter coats to youths through high school age. This year's effort was also joined by Alexandria Fire Department firefighters.

Through generous support and donations from residents, businesses, and, this year, the Coats-for-Kids Foundation, more than 1,000 youths and their families will be able to face winter's chill with not only a new winter coat, but also hats and gloves. "It's all about the community and giving back," said Department Chief Ronald Mastin during a pre-distribution ceremony at the station.

The usual distribution is about 400 coats, according to the program's organizer, Lieutenant Willie Bailey, Fairfax County Fire and Rescue Department. "Because of our affiliation this year with the Coats-for-Kids Foundation, we were able to increase that number to over 1,000 coats." Bailey said.

Firefighters from Burke Fire and Rescue Station 14 hose down the playground area at Lakeside Park following tropical storm Hannah. See e-mail letter below.

From: Michelucci
Sent: Saturday, September 13, 2008 12:35 PM
To: WEBTeam
Subject: Firefighters clean up hurricane mess with fire hoses

Dear Fairfax County Fire & Rescue,

Thank you for cleaning up our community park! The children will be very happy to have their playground and basketball court back.
I sent the following email to a few local papers:

Best wishes,
Pietro Michelucci

Lakeside Park (at Lake Royal) was recently submerged by Tropical Storm Hannah. The Post featured an article about the park showing the water level rising up to the baskets on the basketball court. After the water level dropped, the park was coated with mud (and who knows what else). Children have not been able to play at the park. I mentioned this to an off-duty firefighter I encountered at a Target store yesterday evening. This morning a crew was out to clean up the park. Kudos to the Fairfax County Fire and Rescue Department!

30-Year Award

Captain I Donald P. Montague received his 30 Year Award. Pictured from left to right: Captain II Sheryl L. Hemingway; EMS Batt 3, B-Shift; Deputy Chief Michael T. Reilly, Operations, B-Shift; Battalion Chief Thomas W. Graling, Battalion 3, B-Shift; and Fire and Rescue Station 21, B-Shift personnel; Master Technician Diron D. Powell, Firefighter Jeffrey Pfeifer, Captain I Donald P. Montague, Technician Vernon R. Tomczak; Technician Raul F. Perla; Master Technician Joseph P. Kieler; and Technician Stephen C. Hartman, II.

40-Year Award

Douglas E. Turner, Fire Inspector II, Fire Prevention Division, received his 40-Year Award on October 31, 2008. Pictured left to right: son, Brent; Douglas Turner; wife, Leona; and daughter, Susan Burke.

Top 10 Activity Report

August - October 2008

Ambulance

Unit	Calls
A408	443
A409	424
A411	384
A410	377
A413	377
A430	376
A428	334
A414	295
A436	279
A431	266

Engine Company

Unit	Calls
E410	641
E422	608
E408	603
E409	592
E425	569
E404	544
E411	536
E429	532
E401	526
E418	500

Rescue Squad

Unit	Calls
R426	278
R418	275
R421	235
R401	233
R419	219
R411	204
R439	188
R414	160

Medic

Unit	Calls
M418	624
M425	596
M408	576
M404	574
M422	563
M410	561
M426	509
M429	499
M401	488
M411	477

Battalion Chiefs & EMS Captains

Unit	Calls
EMS404	502
EMS402	362
EMS405	317
EMS403	296
EMS401	269
EMS406	210
EMS407	158
BC404	145
BC403	140
BC402	138

Ladder Company

Unit	Calls
T425	399
T429	385
T422	339
TL430	315
T410	307
TL401	263
TL436	250
TL405	247
TL440	239
T411	230

Unit activity is compiled from the event history file. A unit must be dispatched to a call or added on to be counted. Mutual aid dispatches are included in the activity report.

Engine 409 en route to the station from a call stopped by Olivia Parr's lemonade stand. Olivia was raising money for cancer research. Pictured left to right: Olivia Parr, Firefighter Michael R. Boub, Jr., Acting Technician Thomas Nevin, III, and Technician Robert T. Seward, A-Shift. (Photo by Penny Parr, Olivia's mother.)

Awards & Presentations

Unit Citation

Buoy 60 Potomac River
Fire Boat 420
Captain I Barry W. Maham
Master Technician Christian A. Bastin
Technician Kevin W. Bell
Firefighter Duane R. Breisch

Huntley Meadows Park
Rescue 411
Master Technician Joseph Swift
Technician Carl E. Drew
Technician Ronald E. Franklin

Team Performance

5407 Rolling Road
Engine 427
Captain II Michael R. Smith
Technician James E. Pfister
Firefighter Colin E. Edwards
Acting Technician Christopher Warner

Medic 427
Lieutenant Walter A. Deihl
Acting Technician Vincent Flores

Huntley Meadows Park
EMS406
Captain II James E. Lee, Jr.

BC406
Battalion Chief Craig N. Buckley

Truck 411
Lieutenant Kenneth A. Wildman
Lieutenant Kevin R. Coen
Technician William F. Ward

Ambulance 411
Firefighter Michael L. Baldino
Firefighter Richard D. Fossum

Medic 409
Lieutenant Marcus D. Williams
Firefighter Medic Michael D. Guck
Firefighter Lauren E. Costello

Engine 411
Captain II Arthur D. Cox
Technician Randall K. Schwartz
Firefighter Daniel P. Barker
Firefighter Medic Samuel C. Wilson

7600 Tremayne Place
Engine 413
Captain I Patrick J. Kelly
Technician Jason R. Abitz
Firefighter Roger K. Gent
Firefighter Scott M. Dobson

Rescue 401
Lieutenant John E. Higginbotham
Master Technician Jeffrey T. Wharton
Technician Steven T. Onufrey
Technician Dustin Q. Reynolds

Medic 401
Lieutenant John W. Streeter III
Firefighter Medic Jason W. Trautman

Career Achievement Award

Deputy Chief John Diamantes
Lieutenant George M. Brooks

Meritorious Service Award

Lieutenant Corey A. Matthews

3 Year Safe Driving

Technician Giovanni Vasquez

6 Year Safe Driving

Technician Michael E. Duffy

Citizen Award

Casey Hicks
Christian Prince
Paul Scharsich

Sons of the American Revolution Public Safety Award

Captain II Ryland B. Kendrick
Technician Michael L. Frames

The entire 126th Recruit School, the crew from Fire and Rescue Station 29, C-Shift, family, friends, ran or walked in the sixth annual 5K "Races for Research" in support of the Multiple Myeloma Research Foundation (MMRF), and Lieutenant Jerry Nye (Retired). The event is held annually throughout the United States. The race locally included approximately 1,000 participants and was held November 9, 2008, at Cameron Run Regional Park, Alexandria, raising over $4,550 for multiple myeloma, an incurable blood cancer. Lieutenant Nye's daughter, Lauren, a kindergarten teacher at Bailey's Elementary, dubbed the group "Team Zip-Daddy." Jerry was diagnosed with multiple myeloma in 2004 and retired from the department in October 2008. "Team Zip-Daddy" gathered for a photo following the event. Jerry is pictured in front and to the right of the 126th guidon. Individuals may still make a donation by sending a check to Jerry Nye, 6022 Old Landing Way, Burke, Virginia, 22015. The tax-deductible check should be made payable to MMRF. Recent studies confirm that firefighters are at greater risk for contracting mulitiple myeloma and other blood cancers.

Third Quarter Promotions

Individuals promoted at the Third Quarter Promotional Ceremony. Front Row, (left to right): Technician George L. Carpenter, Fire and Rescue Station 21, B-Shift; Technician Kevin D. Makely, Fire and Rescue Station 41, C-Shift; Captain I Kenneth G. Geffen, Fire and Rescue Station 39, C-Shift; Captain II John M. Chesek, EMS Battalion 4, C-Shift; Technician ScottPatrick I. Zugner, Fire and Rescue Station 40, B-Shift; Catherine G. Schultz-Rinehart, Fiscal Services Division; and Chinaka A. Barbour, EMS Administration. Back Row (left to right): Captain I Cindy S. White, EMS Administration; Lieutenant George W. Weaver, Fire and Rescue Station 30, B-Shift; Technician Brian M. Chinn, Fire and Rescue Station 10, A-Shift; Deputy Chief John Diamantes, Health and Safety; Deputy Chief Michael T. Reilly, Operations, B-Shift; and Fire Chief Ronald L. Mastin.

DC Peer Awards

Television, Internet and Video Association of DC (TIVA-DC) presented the Fairfax County Fire and Rescue Department with the Silver Award for student production of the non-dramatic video category for the Estates Drive incident.

Fire Chief Ronald L. Mastin receives the freshly engraved "Chief's Cup" from the Arlington 9-11 Memorial 5K Race. Pictured from left to right are: Captain II Philip A. Pommerening, Fire and Rescue Station 34, A-Shift; Chief Mastin; Fairfax County Police Officer Steve Lawson; and Master Technician James P. Kotwicki, Fire and Rescue Station 24, A-Shift. The Fairfax County Fire and Rescue Department won the race this year. Over 20 department firefighters were among the over 2000 runners who participated. Technician Laurie Peverill, Fire and Rescue Station 11, B-Shift; Firefighter Stephanie A. Leland, Fire and Rescue Station 31, A-Shift; and Firefighter Mary Kate Costello, Fire and Rescue Station 29, C-Shift, finished first, second, and third in the female fire division. Anyone interested in joining the team should contact Captain Pommerening or Master Technician Kotwicki.

MOUNT VERNON VOICE

FCFRD: Our Heroes

They are our heroes - in many ways. And in the last few weeks our fire and rescue personnel have shown us the diversity of their talents.

On Sept. 11, the anniversary of one of their most heroic operations - battling the results of the terrorist attack on the Pentagon - they were hard at work on Route 1 fighting a three-alarm fire that lit up the corridor and caused over $5 million in damages.

Just five days before, on Saturday, Sept. 6, they were out in full force in Huntington dealing with rising flood waters that threatened, but thankfully did not produce, a recurrence of the devastation that occurred in 2006.

And, members of their elite Virginia Task Force, FCFRD's Urban Search and Rescue Team, left for Louisiana on Sept. 11 in response to Hurricane Ike after recently returning from Georgia and Florida which were threatened by Hurricanes Gustav and Hannah.

But that is not all.

In addition, Fairfax County Fire and Rescue personnel "filled the boot" for the Muscular Dystrophy Association and "Jerry's Kids," over Labor Day Weekend raising over $502,000, the second highest amount in the nation.

Area school children were also beneficiaries of their largess, with more than 600 students receiving backpacks filled with school supplies before the start of this school year.

They are also in the process of collecting coats for the needy which will be distributed in October before really cold weather hits the area.

And getting down to the real nitty gritty, Mount Vernon Fire Station No. 9 recently "adopted" Sherwood Hall Lane, assuming the responsibility for keeping it litter-free.

Multi-faceted.

Multi-talented.

Multi-caring.

We are so lucky to have them.

(Reprinted with the permission of the Mount Vernon Voice)

Fairfax Center Fire and Rescue Station Receives LEED Certification

Fairfax Center Fire Station 40 gets official green building certification.

Its green design will cut an estimated $15,000 per year from energy and water bills combined compared to a traditionally constructed station.

Fairfax County has a green building policy, and the station is just one of five green buildings already built.

Fairfax County's largest fire station recently received official certification as a green building. Built in 2006, Fairfax Center Fire and Rescue Station 40 was certified this month under the U.S. Green Building Council's Leadership in Energy and Environmental Design (LEED) rating system. The station incorporated green features in six areas, including water efficiency, energy efficiency, and use of recycled materials.

For the complete release, including related links, visit www.fairfaxcounty.gov/news/2008/234.htm.

MARK S. CIARROCCA
11415 LILTING LANE, FAIRFAX STATION, VA 22039

August 2, 2008

Chief Ronald Mastin
Fairfax County Fire and Rescue Service
4100 Chain Bridge Road
Fairfax, VA 22030

Dear Chief Mastin;

Two months ago, on June 3, 2008, my wife and I were involved in an unfortunate equestrian accident on a remote horse trail in the Fairfax Station area of the County. Within seconds, we went from a peaceful two hour horseback ride to laying injured on a remote trail with our horses nowhere in sight.

The service we received from Engine 432 and Medic 432 was exceptional and far exceeded expectations. First of all, your units were able to quickly locate us based on some rather sketchy directions. Lieutenant Cindy White made very appropriate patient care decisions quickly and efficiently. After initial stabilization of our orthopedic injuries in Medic 432, Lieutenant White made to decision to transport both of us in the same unit. This simple decision made our lives a lot easier in coordinating after school child care and neighbor notification for our run away horses.

The most prominent memory we have of the medic crew is the caring demeanor and compassion they demonstrated. I recall Lieutenant White repeatedly suggesting to the emergency room nurse that I needed more pain medication. In fact she was correct and I sincerely appreciate her efforts in encouraging the hospital staff to continue the pain management that she had started.

Captain Walter Brown of Engine 432 quickly shifted from rescue mode to find the horses mode. It is my understanding Engine 432 left the accident site and responded to our barn to look for the horses. Not finding them, Engine 432's crew walked great distances on the horse trails and adjoining neighborhoods searching for our two draft horses, each weighing about 1800 pounds. It gave us great relief to know that Captain Brown located the horses just as we were arriving at Fairfax Hospital, about one hour after the accident occurred. Engine 432's crew, undaunted by the size of the horses and assisted by the Fairfax County police department, lead the horses back to our barn, removed their tack, and secured them in the paddock.

The type of service delivery mentioned above is simply exceptional and demonstrates the desire and ability of your employees to do what is best for the citizens (and their horses). Please pass on our thanks to the crews of Engine 432 and Medic 432. If appropriate, please consider these employees for outstanding performance awards or unit citations for their actions on incident 20081552077. Please feel free to contact me at 703-250-2265 if you desire more information.

Sincerely,

Mark S. Ciarrocca

"Taking Up"

Deputy Chief
Kevin L. Kincaid

Entry Date: September 24, 1979
Retirement Date: July 22, 2008
Recruit School Number: 49th
Assignments: Stations 23, 32, 17, 1, 25, 32, Public Safety Communications Center, Health and Safety, EMS 3, Recruitment, Deputy Chief Safety and Personnel Services

Likes about the Fire Department: There is no other job that develops, rewards, and celebrates teamwork and execution like the fire service. I liked the sense of accomplishment and achievement that came from a meaningful contribution to a successful conclusion, either on a call or on a project. I like the camaraderie and absolute ingenuity and inventiveness of firefighters and paramedics, the will and drive to get any job done, and done well, in spite of any obstacles.

Will miss about the Fire Department: The people and the ability to contribute to meaningful and worthwhile endeavors, and working to help create an even better department.

Plans for the future: Lots of travel. A house somewhere on a beach.

Words of wisdom: Find something in the department that you love and throw all your energy and abilities into that something. Strive to be better at whatever you have chosen every day. Take advantage of the many opportunities to better yourself through the various training, educational, and operational opportunities available. Get out and see how other departments operate. These things will only open your eyes further and make you better.

What got you interested in the fire service? First aid training, lifeguarding, high school government class; Mike Macario (Mr. EMS) did a show and tell to my high school health class on Ambulance 423.

Who or what made an influence in your career? There are way too many influential people to list everybody, but Pat Morrison, Mike Mohler, Chief Neuhard, Gerry Connolly, Kate Hanley, Chief Stinnette, Tony Griffin, Glenn Curtis, Bill Timmons, Ben Dawson, Rob Stalzer, and Toni Garcia all had a significant influence or impact on my career in very different ways. My involvement in the fire department and our various communities through my work in the Union provided me with the reward and understanding of what it meant to be part of something much larger than me. This work and involvement was absolutely the highlight of my career in the fire service.

Medical Ambulance Bus Provides Support for Patients During Fire

Firefighters responded to a two-alarm fire at a laundromat at 8796 Sacramento Drive. Damages were estimated at $2.5 million. Fifteen patients at a nearby dialysis clinic were removed and monitored by emergency personnel while electricity was restored to the clinic.

In Memoriam

Deputy Chief
(Retired)
Clark O. Martin, Jr.
1952 - 2008

Technician
John Loss
McLean Fire and Rescue
Station 1, B-Shift
1953 - 2008

Former President
and Lifetime Member
Eric D. Cramer
Burke Volunteer
Fire Department
1951 - 2008

West Centreville Fire and Rescue Station 38 hosted the Centreville American Legion Post 1995 for a flag retirement ceremony on November 8, 2008. More than 250 American flags were respectfully retired and disposed of during this year's event.

Personnel from the Penn Daw Fire and Rescue Station 11 invited 101-year-old Esther Devers to come to the fire and rescue station for a visit on November 7, 2008. Firefighters called on Ms. Devers to escort her to the station. Ms. Devers was a founding member of the Penn Daw Fire and Rescue Station.

Anniversaries

5 Years

Firefighter Kathy A. Averys
Firefighter Carlton D. Barnes
Technician Eric J. Bartholomew
Technician Christopher M. Blair
Firefighter Michael R. Boub, Jr.
Herbert H. Brown, Jr.
Technician Ben G. Coffman
Technician Andrew P. Devlin
Technician Brian C. Edmonston
Technician Terrance L. Ewell
Technician Sarah M. Goldman
Firefighter Ferris A. Hayward
Firefighter Claude R. Johnson
Technician Meredith C. King
Firefighter Duane E. Lawrence
Firefighter Stephanie A. Leland
Technician Laura E. Pollard
Dana F. Powers
Jaime E. Russell
Technician Serge L. Sagna
Technician Robert C. Schoenberger
MaryBeth Sefton
Acting Lieutenant Ronald S. Seghetti
Technician Robert T. Seward
Firefighter Paul T. Smith
Firefighter Edgar Torres, Jr.
Technician Giovanni Vasquez

10 Years

Lieutenant Allen R. Batson
Technician Raymond K. Beaver, Jr.
Master Technician Mark G. Briskey
Technician Michael D. Brown
Technician Robert S. Browning
Firefighter Rebecca R. Brummond
Lieutenant Tie L. Burtlow
Lieutenant Laurie E. Byrne
Firefighter Jose Calderon, Jr.
Lieutenant Keith W. Cerzullo
Master Technician Jaemohn D. Cloyd
Master Technician Donald R. Crum
Lieutenant Terrance L. Fayson
Technician Thomas A. Ferguson
Captain I Michael J. Fischer
Lieutenant David S. Gaertner
Firefighter Stefan C. Gansert
Lieutenant Todd R. Gorham
Captain II Sheryl L. Hemingway
Captain I Charles C. Henderson
Firefighter James R. Hill II
Master Technician Timothy D. James
Master Technician Timothy M. Kelly
Lieutenant Chery L. Kemp
Technician Rolf F. Lenzsch, Jr.
Lieutenant Thomas R. Mayhew
Lieutenant Jeffrey L. Mongold
Acting Lieutenant Christopher M. Morgan
Lieutenant Bryan J. Nix, Jr.
Lieutenant Janet T. Norko
Lieutenant John E. Peters
Firefighter Richard G. Peterson
Firefighter Robert J. Pilsucki
Technician Samuel L. Porter
Lieutenant Scott F. Primrose
Firefighter Livingston J. Rolle
Firefighter George H. Samartino
Master Technician John A. Smith
Lieutenant John W. Streeter III
Technician Daniel R. Thompson
Acting Lieutenant Clifford A. Watson
Captain I Oscar T. Wells IV

15 Years

Master Technician Jeffery S. Allen
Technician Lillie Allen-Peyton
Paul J. Bertovich
Captain II Fred H. Brandell, Jr.
Firefighter Marlon J. Crockett
Captain I Colin D. Flanigan
Master Technician Charles W. Horton, Jr.
Captain II Glenn D. Kaplan
Lieutenant Ronald J. Kuley
Captain I Steven T. McFarland
Donald R. Melick
Captain I Victor M. Miller, Jr.
Lieutenant Matthew J. Nacy
Master Technician H. Timothy O'Toole
Captain I Ronnie A. Rodriguez
Captain II Robert P. Ruwe
Firefighter Richard S. Slepetz
Master Technician Marc L. Straubinger
Lieutenant Rex E. Strickland III
Captain II Kenny J. Wolfrey

20 Years

Firefighter Gordon E. Bennett
Lieutenant James R. Bookwalter. Jr.
Firefighter Hugh S. Boyle
Master Technician John L. Capps
Lieutenant Thomas M. Connolly
Lieutenant James L. Dennis
Master Technician Anthony E. Doran
Technician James M. Hayes
Captain I Todd M. Marshall
Captain II Brian P. Rooney
Technician David D. Sweetland
Lieutenant Daniel T. Young

30 Years

Captain I Gary B. Bunch
Paul E. Carlin
Lieutenant Alan G. Gray
Technician John J. Loss
Technician Michael D. Macario
Lieutenant Michael P. Regan
Technician Michael J. Stock

35 Years

Technician Thomas C. Cooke

40 Years

James J. Jordan

New Hires

Norman J. Chmielewski
Melissa A. Davis
Kristopher L. Lacy
Cathy L. Maynard
Mark S. Pullman

Retirements

Edith V. Beitzel
September 30, 2008

Captain I Gary B. Bunch
September 24, 2008

Lieutenant
Michael P. Graham
September 1, 2008

Master Technician
Virgil J. Weber, Jr.
November 24, 2008

Deputy Chief
Michael L. Wood
October 21, 2008

Fairfax County Fire & Rescue Department
Attn: Public Affairs and Life Safety Education
4100 Chain Bridge Road
Fairfax, Virginia 22030

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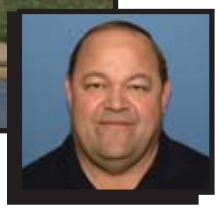
Station Profile

Annandale Fire and Rescue Station 8

Captain II
William B. Harlowe
Station Commander



Volunteer Chief
Roger Waller

Station constructed: Founded in 1940 building has gone through several additions and renovations. The latest was completed in 1997.
Station specialty: Tower Ladder 408, E408 Field Decon Unit
Square miles in first due area: 9
Specific hazardous/target areas: Sleepy Hollow Nursing Home, I-495, Wakefield Park/ Audrey Moore Recreation Center, and Port Royal Road industrial area.
Total calls in 2007: 9,435
Equipment assigned to station: SUV (3), tower, van, utility, medic-ambulance, engine, medic, and canteen
Station personnel: A-Shift: Captain I Larry E. Jenkins, Lieutenant Joshua T. Allison, Acting Lieutenant Joseph A. Oleksia, Acting Technician Davin E. Bridges, Technician Michael C. Nelson, Technician Robert J. Sweeney, Firefighter Medic John P. Powell, Firefighter Eduardo J. Borgenarguello, Firefighter Howard S. Chong, Firefighter Timothy D. Kim, Firefighter Richard L. Merrell, Firefighter Donald W. Rohr, and Firefighter David P. Saunders. **B-Shift:** Captain I Troy H. Dean, Lieutenant William D. Vance, Lieutenant Bryan J. Nix, Jr., Master Technician Philip C. Devereaux, Master Technician H. Timothy O'Toole, Acting Technician Gregory B. Barnett, Acting Technician Richard M. Tamillow, Firefighter Joshua R. Allen, Firefighter Ian R. Brill, Firefighter Seo He Chae, Firefighter Clarence B. Dickens II, Firefighter Timothy A. Fairchild, Firefighter Jason Munt, Firefighter Alex E. Stewart. **C-Shift:** Captain II William B. Harlowe, Lieutenant Clifton Allen, Jr., Lieutenant Jeffrey R. Allen, Lieutenant Peter B. Besong, Master Technician Jaemohn D. Cloyd, Acting Technician Mario A. Board, Technician John M. Lockhart, Technician Gary P. Thompson, Firefighter Benjamin D. Andreson, Firefighter Kathy A. Averys, Firefighter Magaly I. Hernandez, Firefighter Duane E. Lawrence, Firefighter Andres F. Martinez, and Firefighter Brian D. Passmore.