



2024-2025 Goals and Objective Results

This list of Goals and Objectives represents the work of the Strategic Planning Committee and Staff of the Destin Fire Control District (DFCD). Goals are divided into the divisions to which they pertain, or in some cases are general organizational goals. The goals may be operational benchmarks or administrative.

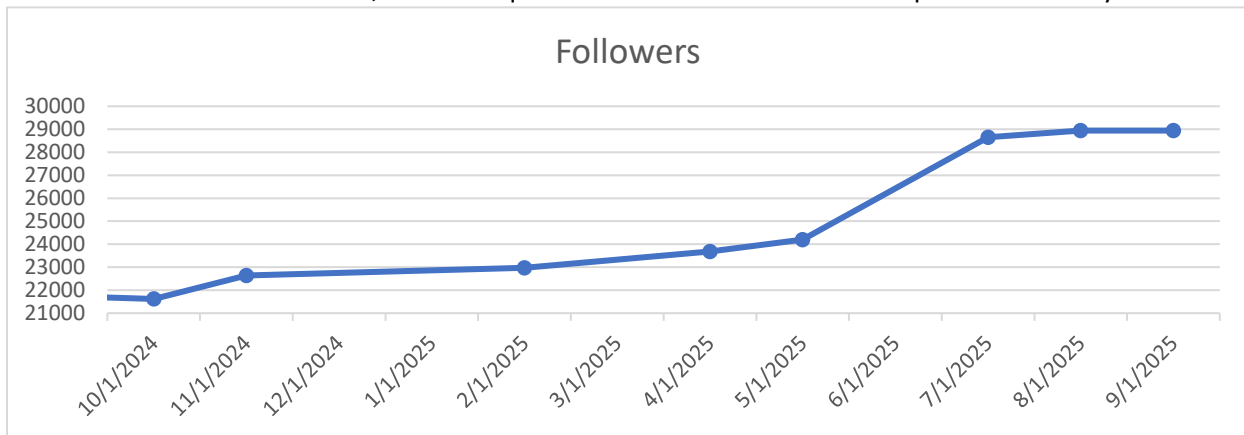
1. Administration

Goal 1.1 – Identify and improve working relationships with the community and surrounding departments.

Objective 1.1.1 – Establish a communications group to enhance our presence on social media platforms.

i. **Measurement:** Increase Social media engagement by 5%.

1.1.1 RESULTS: On Oct. 1, 2024 the total followers on the district’s Facebook was 21,619. On August 21, 2025 the total followers are 28,943 that equates to a 35% increase from the previous 365 days.



Objective 1.1.2 – Improve face-to-face communications within organization with surrounding department heads.

i. **Measurement:** Attend 75% of all local OCFRO or specialty Chief meetings.

1.1.2 Results: All OCFRO or specialty Chief’s meetings were attended in FY 24-25 by the Fire Chief or his designee as per the OCFRO meeting minutes.

Goal 1.2 – Keep the District’s Information Technology infrastructure updated to current industry standards.

Objective 1.2.1 – Throughout the FY, replace outdated and obsolete technology with new computer workstations, tablets, and mobile data terminals.



1.1.2 Results: In FY 24-25, 1 desktop computer was added, 6 were replaced, Chief, Deputy, Admin, and BCs were issued new computers, and 1 command tablet replaced.

Objective 1.2.2 – Evaluate the DFCD Website and institute changes as identified to reflect updates to the department.

- i. **Measurement:** Improve website and update in accordance with new requirements set forth by Statue # 189.0695

1.2.2 Results: Website redesign via Streamline; launched on Oct 1, 2025 for §189.0695 compliance.

Goal: 1.3 – Human Resource and Finance workflow system integration.

Objective 1.3.1 – Maintain and/or implement the new accounting software with HR module during the FY.

1.3.1 Results: New accounting software and system evaluated and will look to implement in the next 5 years. Current system in place meets all standards and requirements of DFCD.

Objective 1.3.2 – Personnel training and process development to provide and effective workflow system.

Goal: 1.4 – Analyze district-wide fuel management and usage.

Objective 1.4.1 – By the end of FY 24-25, research, procure, and implement a cloud-based fuel management system to monitor fuel usage and site trends.

- i. **Measurement:** System installation with District-wide site reporting.

1.4.1 Results: System evaluated for accuracy and compliance with our accounting system, current system in place meets all standards and requirements of DFCD.

Goal: 1.5 – Provide staff, residents and other outside agencies accurate and timely financial accounting services while ensuring compliance with applicable policies, regulations, and reporting requirements.

Objective 1.5.1 - Maintain financial stability of capital assets (plan for future capital obligations).

- i. **Measurement:** Maintain no less than 10% underfunding within Asset Fund

1.5.1 Results: Meets Goal: Asset system over funded at end of fiscal year in preparation of future expenditures.

Objective 1.5.2 - Reduce outstanding accounts receivable

- i. **Measurement:** Give customers multiple payment options by continuing to evaluate new software and/or platforms for customer convenience.

1.5.2 Results: New payment systems evaluated for future implementation, current system in place meets all standards and requirements of DFCD.



- ii. Measurement: Maintain current customer contact information by working with operations personnel to assist with updating accurate customer contact information for returned invoices.

1.5.2 Results: Reduction of General A/R 66% during FY24-25 as result of updated contact information and reoccurring collection efforts.

Objective 1.5.3 - Provide timely and accurate financial reporting and transactions.

- i. Measurement: No less than 80% of financial reports closed by monthly board meeting.

1.5.3 Results: All monthly financial reports closed and reported on monthly board meetings.

2 Fire and Rescue Operations

Goal 2.1 – Ensure the Destin Fire Control District is staffed and equipped in geographic locations to provide response times to fire and EMS related incidents with an effective response force based on community needs and accepted practices.

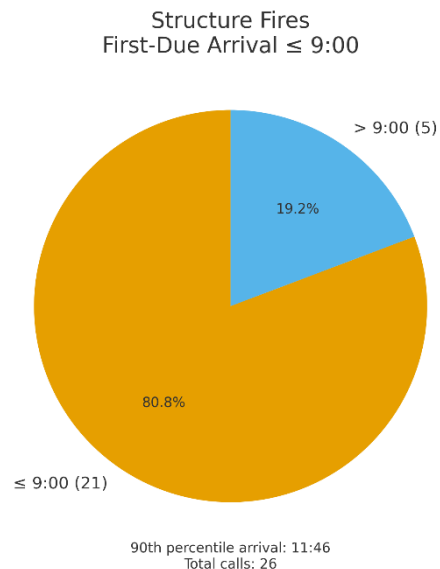
Objective 2.1.1 – For 90% of low and moderate risk structural fire incidents, the first-due unit shall arrive within 9 minutes and the full firefighting force within the district shall arrive within 15 minutes total response time. The effective firefighting force should be capable of preventing further escalation of the fire incident.

Objective 2.1.2 – For 90% of high risk structural fire incidents, the first-due unit shall arrive within 9 minutes and the full firefighting force within the district shall arrive within 15 minutes total response time. The effective firefighting force should be capable of preventing further escalation of the fire incident.

- i. Measurement: Report posted from PCR software showing all statistics.

2.2.1-2.2.2 Results: All structure fires categorized as low and moderate structure fire incidents.

Figure: Structure Fires – First-Due Arrival ≤ 9:00 (80.8% within; 90th percentile 11:46; N=26)

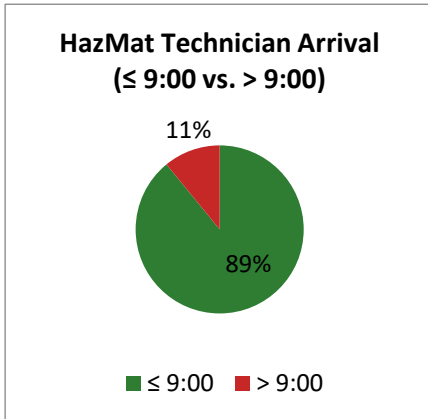


Goal 2.2 – Ensure that the Department is staffed and equipped in geographic locations to provide response times to non-fire/special operations related incidents with an effective response force based on communities needs and accepted practices.



Objective 2.2.1 – For 90% of all incidents, the Department’s Hazardous Materials Technicians shall arrive within 9 minutes total response time. For 90 % of hazardous materials incidents requiring a full team response, the team should be called within 20 minutes total time.

- i. Measurement: Report posted from PCR software showing all statistics.

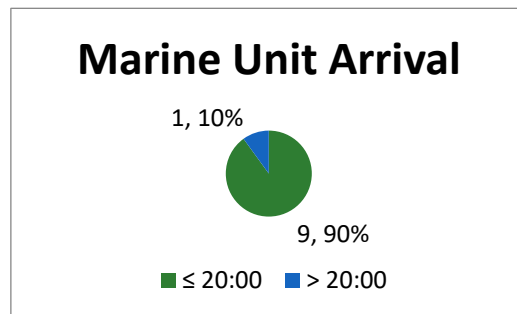


2.2.1 Results: Out of 55 total Hazmat Incidents if FY 24-25, 49 were responded to under the 9:00 threshold and 6 were over 9:00 mins. This does not account for “Alpha” or non-emergency responses compared to “Delta” emergent responses.

Objective 2.2.2 – For 90 % of all incidents, the marine unit shall arrive within 20 minutes total response time. This unit shall be capable of initiating the mitigation of a water rescue incident from land or sea.

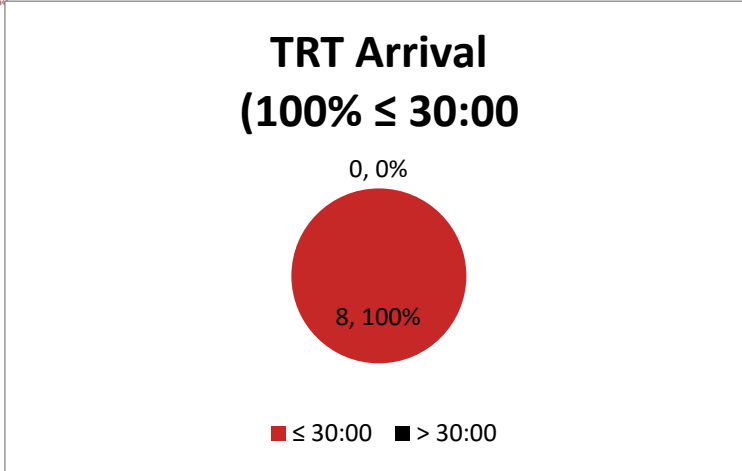
- i. Measurement: Report posted from PCR software showing all statistics.

2.2.2 Results: Marine unit arrival ≤20:00: 90.0% of 10 incidents.



Objective 2.2.3 – For 90% of all technical rescue incidents, a first responder unit shall arrive within 9 minutes total response time and the technical rescue team shall arrive within 30 minutes total response time.

- i. Measurement: Report posted from PCR software showing all statistics.



2.2.3 Results: TRT arrival ≤30:00: 100.0% of 8 incidents.

Goal 2.3 – Ensure fire department members receive annual training

that is required or recommended by regulatory organizations.

Objective 2.3.1 –Provide annual training and drills based on the Insurance Services Office (ISO) recommendations. Ensure every member reaches 100% of training requirements.

- i. Measurement: ISO training report showing all required training hours and summary of hours completed.

2.3.1 Results: As it applies, the ISO training measurement is calculated per calendar year and not FY. Calendar year 2024 was 100% compliant and Calendar year 2025 trends are below:



2.3.1 Results Cont: for calendar year 2025, Captains have completed 80% of their yearly training, Engineers 91%, and Firefighters 92%, all with three months remaining.



Goal 2.4 – Ensure fire department members receive annual training that is relevant to current responsibility and operations.

Objective 2.4.1 – Provide training to all members prior to the implementation of any new or revised operational procedure.

- i. Measurement: List all new/revised procedures in FY. Publish summary of all relevant training completed.

2.4.1 Results: SOG’s updated: Marine 19, TRT-109, PRWC Instructor,

Objective 2.4.2 – Continue to provide training to all members prior to the implementation of any new or updated equipment or apparatus.

- i. Measurement: List all new/revised procedures in FY. Publish summary of all relevant training completed.

2.4.2 Results: LOTO, All Beach Safety SOG’s, Operational SOG’s are being evaluated.

Goal 2.5 – Enhance operational capabilities within the Urban Search and Rescue Program (USAR).

Objective 2.5.1 – Increase the technical-operational capabilities of the current USAR program by increasing the member size of the current USAR operational capabilities.

- i. Measurement: Increase the number of FLUSAR Rescue Specialists.

2.5.1 Results: FLUSAR Rescue Specialist increased from 18 in FY 23-24 to 21 in FY 24-25. 17% Increase

- ii. Measurement: Increase the number of Swiftwater Rescue Technicians.

2.5.1 Results: Swiftwater Rescue Technicians increased from 9 in FY 23-24 to 14 in FY 24-25. 55% Increase

Goal 2.6 – All water supply coordination and maintenance records housed within a single software program.

Objective 2.6.1 – To have personnel or an entity dedicated to water supply coordination through Destin Water Users.

- i. Measurement: Quarterly progress reports developed and provided to the Destin Fire Control District.

2.6.1 Results: All hydrants completed in FY 24-25, breakdown is below per Quarter:

October 2024-September 2025	Total 1st Quarter	Total 2nd Quarter	Total 3rd Quarter	Total 4th Quarter	Total # of Hydrants
	1049 Hydrants	17 Hydrants	1 Hydrant	139 Hydrants	1,206 Hydrants



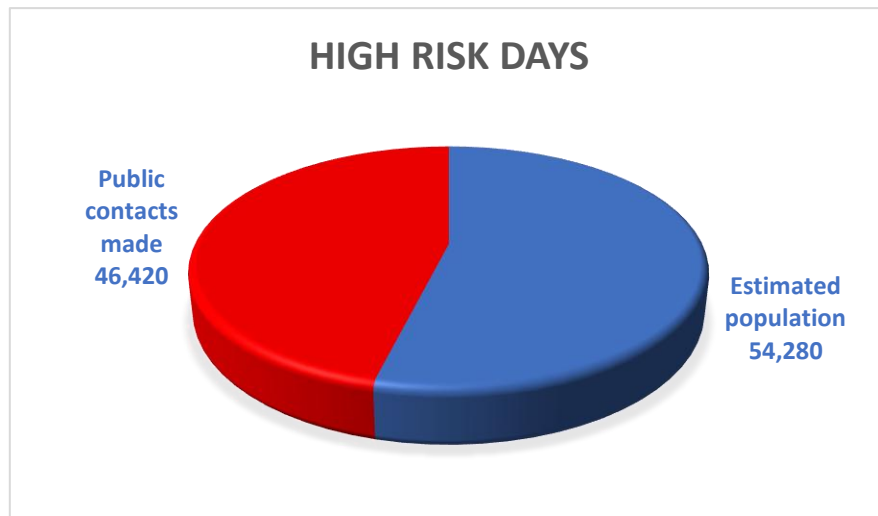
3 Beach Safety Operations

Goal 3.1 – Drowning prevention

Objective 3.1.1 – Have a minimum of 90% public contact on high-risk days where flags are posted double red/water closed to public.

- i. Measurement: Publish public contact numbers to include estimated population and total public contacts.

3.1.1 Results: Estimated population: 54,280; Public contacts: 46,420; Average public contact: 85.51%.

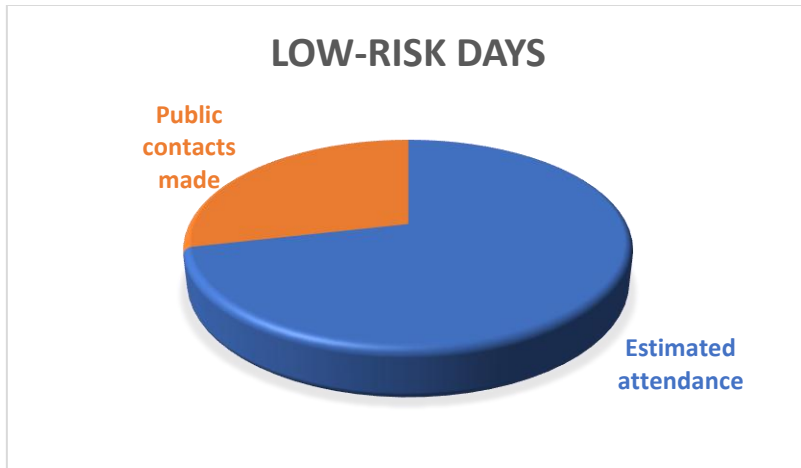


Objective

3.1.2 – For 25% public contact of beach attendance on low-risk days where flags are posted as yellow, yellow/purple, and red flag days.

- i. Measurement: Publish public contact numbers to include estimated population and total public contacts.

3.1.2 Results: Estimated attendance: 1,910,976; Public contacts: 764,724; Average public contact: 38.39%.



Objective 3.1.3 – For 90% preventative actions on high-risk days, all personnel to make contact within 10 mins of individual arriving in zone if capable.

- i. Measurement: Publish public contact numbers to include estimated population and total public contacts.

3.1.3 Results: All zones instructed to meet requirement and achieved (qualitative compliance noted).



Objective 3.1.4 – Continue to provide education in the form of pamphlets, signage, brochures, visual aids, social media, and verbal communication on the importance of the Flag Program and the meaning of all flags.

- i. Measurement: publish educational pamphlet numbers from our daily activities report.

3.1.4 Results: Total public education instances: 95,370 to include issuance of Pamphlets, Signage, Brochures, Visual Aids, social media, and verbal communication.

Goal 4.1 – Training



Objective 4.1.1 - Meet or exceed USLA standards for training by conducting a monthly rescue scenario and 30 minutes of physical fitness training performed daily.

- i. Measurement: Document and publish physical training hours in annual report.

4.1.1 Results: Monthly rescue scenarios conducted; 30 mins daily physical fitness logged.

Objective 4.1.2 – 100% of all Division employees meet CPR certification requirements by USLA approved agencies

- i. Measurement: Document and publish CPR training hours in annual report and provide CPR cards to all employees for personnel files.

4.1.2 Results: CPR certification: 100% compliance across Beach Safety employees.

Goal 4.2 – Junior Lifeguards

Objective 4.2.1 – A minimum of 20% of junior lifeguard participants complete a 550-yard swim in 10 minutes or less.

- i. Measurement: Document and publish number of registered junior lifeguards and number of qualifying in annual report.

4.2.1 Results: 5 of 20 Junior Lifeguards completed 550-yd swim ≤10:00 (25%).

Goal 4.3 – Response Time

Objective 4.3.1 - For 90% of beach calls, beach safety will have a response time of less than 9 minutes for calls that occur during service hours.

- i. Measurement: Document and publish report in annual report on all beach calls.

4.2.1 Results: 100% of all Destin Beach Safety responses on the beach were under 9 mins for response time.

Goal 4.4 – Full Time Employees

Objective 4.4.1 - For 75% public contact daily listed on the Daily Activity Report (DAR) for public contact.

- i. Measurement: Publish public contact numbers to include estimated population and total public contacts.

4.4.1 Results: Off-season estimated attendance: 62,835; Average public contact: 34.54%.

Beach Safety Operations Contributing Factors to deficiencies: The division faced significant leadership and staffing transitions during this operational period, which directly impacted on our ability to consistently achieve the targeted public contact percentage:

- **Leadership Transition:** The loss of a Division Chief with over 20 years of institutional knowledge created a gap in strategic oversight, mentorship, and continuity of operations. This affected consistency in staff performance and long-range planning.
- **Experienced Lieutenant Departure:** The departure of a full-time Lieutenant with 5+ years of field experience reduced supervisory capacity and removed a critical layer of operational leadership during peak demand periods.
- **New Officer Development:** One of the two officers was completing their first full season in a supervisory role. While highly capable, the learning curve associated with this transition limited efficiency in task delegation and proactive engagement.



- **Rapid Onboarding of New Leadership:** A new Lieutenant was hired shortly before the season began. Despite strong qualifications, the limited acclimation time meant they were simultaneously learning internal systems, personnel, and operational demands while managing frontline responsibilities.

Together, these factors resulted in decreased supervisory coverage, fewer proactive patrols, and reduced efficiency in making public contacts compared to historical averages.

4 Medical Division Operations

Goal 4.1 – With Electronic Care Reports (e-PCR), ensure all reports are promptly and thoroughly reviewed for accuracy.

Objective 4.1.1 – All critical event electronic patient care reports are reviewed for quality assurance by the Medical Division Chief (or designee) within 96 hours of completing the incident. This will include all cardiac arrest, trauma alert, sepsis, and STEMI alert reports.

- i. Measurement: All reports marked “critical” will be reviewed for quality assurance and marked “complete” in the ePCR system within 96 hours of shift completion.

4.1.1 Results: 100% of all reports marked “critical” in ePCR system are reviewed for compliance by the Medical Division Chief, Medical compliance Captain, or the Deputy Chief.

Objective 4.1.2 – 100% of the electronic patient care reports shall be reviewed by the Officer in Charge of the ePCR system and assured all reports are completed.

- i. Measurement: 100% of ePCR reports to be reviewed and in the “complete” status in the ePCR system prior to end of month for NIFIRS/ NEMSIS upload.

4.1.2 Results: 100% of all incident reports completed and reviewed by shift supervisor for FY 24-25. Breakdown below.



Objective 4.1.3 – Any electronic patient care report that has been identified as not meeting the quality core measures deemed by the Medical Division Chief will be reassigned to the appropriate field clinician within 14 days for review and completion.

- i. Measurement: All returned reports to field clinicians be revised and resubmitted for review within 6 days of receiving.

4.1.3 Results: None needed revising in FY 24-25.



Goal 4.2 – CPR/ AED Program

Objective 4.2.1 – Continue to enhance year-round CPR/AED program. Program based on community needs and resources.

- i. Measurement: Publish yearly CPR/AED training numbers for comparison to previous years.

4.2.1 Results: First year assessed: Total of 218 cards issued in 2025. See Breakdown:

Course	2025 Cards Issued:
Heartsaver CPR AED	3
PALS Provider	10
ACLS Provider	23
BLS Provider	60
Heartsaver First Aid CPR AED	122

Objective 4.2.2 – Continue to develop the CPR/AED instructor certification program within the Destin Fire Control District and the United States Coast Guard.

- i. Measurement: Increase number of CPR/AED instructors.

4.2.2 Results: FY 23-24 CPR Instructors = 3 (Clark, Reed, Duplessis) FY 24-25 CPR Instructors = 9 (Reed, Clark, Duplessis, Johnson, Perea, Hagen, Koenig, Jaehnig, Morrison) 200% increase.

5 Inspections Department Operations

Goal 5.1 – Ensure the Department provides continuing Fire and Life Safety education and Public Information based on community needs and available resources.

Objective 5.1.1 – Continue to provide varying Public Education year-round programs based on community needs and resources to include but not limited to: fire station tours, fire safety lectures, fire extinguisher training, smoke alarm installations, hurricane safety information and occupant protection safety.

- i. Measurement: Log and publish a list of programs and participation for those programs.

5.1.1 Results: Fire Extinguisher Training attendees – Jacob’s Ladder 25/25; First Baptist 6/6; City of Destin 112. No other current programs.

Objective 5.1.2 – For 90% of public contact for fire prevention, Fire and Life Safety prevention presentation will be made for all children in all day care centers (within the district) and through Second grade at Destin Elementary.

- i. Measurement: Compare participation numbers for fire prevention presentation by comparing to current population of preschools, Destin Elementary Kindergarten, First Grade, and Second Grade.



5.1.2 Results: Total children reached (Preschool + K-2): 910.

- a. **Preschool** present:
 - i. Child Care Network: 40
 - ii. Stepping Stones @ Roane: 75
 - iii. Jacob's Ladder: 85
 - iv. Noah's Ark: 55
 - v. Village Baptist: 55
- b. **Kindergarten**: 200
- c. **First Grade**: 200
- d. **Second Grade**: 200

Goal 5.2 – Provide fire code enforcement services that match the needs of the communities we serve.

Objective 5.2.1 – Follow-up on all reported fire violations by the Fire Inspections division.

- i. Measurement: Follow up on all Fire Inspection violations within 45 days of published report and document corrective actions taken.

5.2.1 Results: Quantity of Completed/In Progress/Scheduled Reinspection's as of 10/1/25:

- Completed: 160/160 within 45 days and have been closed out in First Due
- In Progress: 15, working on getting all items completed in First Due
- Completed: 254/254 within 45 days and have been closed out in Mobile Eyes.

Objective 5.2.2 – Continue to review inspection records for accuracy and completion.

- i. Measurement: All inspection records are signed off by the Fire Marshal for accuracy and completion.

5.2.2 Results: List current CEUs for FY 24-25

- Fire Marshal Taylor: 40.5/18 Hours
- Capt. Morris: 72/18 Hours
- Lt. Ratliff: 20.5/18 Hours

Goal 5.3 – Improve Fire Prevention effectiveness/efficiency.

Objective 5.3.1 – Expand use of current technology that includes line personnel electronically completing pre-fire plans in the field.

- i. Measurement: Increase the capability of electronic Pre-fire plans in the field with new technology and field capabilities.

5.3.1 Results: Pre-fire plan field capability expanded via First Due implementation; metric to be tracked in FY25-26.

Objective 5.3.2 – Provide education to line personnel about proper fire prevention practices.



- i. Measurement: Document training to line personnel on the proper fire prevention practices and Pre-plan technology.

5.3.2 Results: Training on the new pre-plan program and prevention practices built into monthly training in Vector Solutions.

Goal 5.4 – Educate the community about the importance of maintaining fire protections systems.

Objective 5.4.1 – Identify and educate the proper maintenance supervisor or property manager on the proper practices to maintain fire protections systems in commercial properties.

Objective 5.4.2 – Continue current practice of following up on multiple false alarms at the same address to ensure the cause has been addressed or repaired.

- i. Measurement: Document through the Fire Marshal multiple false fire alarm calls at the same address and document invoicing per department policies.

False alarm follow-ups: list of fire alarm calls available; invoicing per policy – publish in year-end report.

- ii. Measurement: Publish list in end of year report.

False alarm follow-ups: list of fire alarm calls available; invoicing per policy – publish in year-end report.

Goal 5.5 – Remain current with trends and nationally accepted practices and standards for fire investigations.

Objective 5.5.1 – Ensure compliance with Insurance Service Office (ISO) standards by completing 40 hours of fire investigator training for the prevention personnel annually.

- i. Measurement: Documentation of minimum ISO training standards and publish summary of division in end of year report.

5.5.1 Results: Fire Investigator Morris completed 20 hours of Investigator training in FY 24-25. 40 hours every 3 years required.

Objective 5.5.2 – All members to maintain Inspector Certifications within the department according to NFPA standards and timelines.

- i. Measurement: Ensure entire Fire Prevention department maintains all inspector certifications with required reoccurring training to maintain certifications.

5.5.2 Results: Inspector certifications kept current in FY 24-25 per State of Florida Fire Marshal's Office.

Goal 5.6 – Inspection of Buildings

Objective 5.6.1 – 100% of target buildings in District are inspected annually.

- i. Measurement: Ensure all target buildings listed in district are inspected annually and provide inspection information on annual report.

5.6.1 Results: Target buildings inspected: 12/12 = 100%.

Objective 5.6.2 – 90% of all businesses in District are inspected annually.



- i. Measurement: Document inspections on all businesses listed in District and ensure a min of 90% are completed annually. Provide inspection information on annual report.

5.6.2 Results:

- Business inspections completed in First Due: 523 of 2,096 = 25%
- Business inspections completed in Mobile Eyes: 195/2,096 = 9%
- Total Inspections: 523/2096= **34%**

This percentage does not reflect continuing inspections/reinspection's that were performed under the old Mobile Eyes System that continued, albeit in smaller numbers, through 2025 as it is being gradually phased obsolete. It also does not reflect that during the transition to this new system, thousands of bad data records were errantly transferred to the new First Due Inspection System. The process of learning the new system, building out each of 40+ inspection types, troubleshooting each inspection type in the field, and eliminating thousands of bad data records for the benefit of both Fire Prevention and Fire Suppression personnel for preplanning purposes, while also integrating a brand new reporting system for fire/life safety system service providers (IROL) and a brand new system for performing plan reviews (Blue Beam), all contributed to the low percentage of completed inspections to date. As time progresses with these new systems, we can expect a steady climb in results in all areas: completed inspections, preplan execution, plan review turnaround, and increased compliance through service providers/property owners.

Goal 5.7 – Plan Reviews

Objective 5.7.1 – For 90% of all received plan reviews to be completed within 7-10 business days of being received by the Fire Marshal.

- i. Measurement: Document plan review acceptance date and completion and ensure a min of 80% are completed within 7-10 business days. Provide information on annual report.

5.7.1 Results: 94% of received plan reviews completed within 7-10 business days after being received in FY 24-25.

6 Support Services

Goal 6.1 – Improve current safety and health practices within the organization.

Objective 6.1.1 – Have a Safety Meeting program to include near-miss events.

- i. Measurement: Document and publish quarterly meeting minutes.

6.1.1 Results: Safety meetings held quarterly with meeting minutes published on the department server.



Objective 6.1.2 – All reported safety hazards and corrective measures will continue to be reviewed by the Safety Committee for recommendations for improvement within 120 days of the incident.

- i. Measurement: Follow up by the Safety Committee Chair to be reported to the Fire Chief and published in end of FY report.

6.1.2 Results: Reported Safety hazards and corrective measures are reviewed by the safety committee and will review the year end report with Fire Chief.

Objective 6.1.4 – Public information will maintain media contacts and report community fire and life safety concerns through varying media outlets, print, television, radio, and social media networks on a continual basis.

Objective 6.1.5 – Continue to offer free car seat safety checks and installations.

- i. Measurement: Document all car seat safety checks with 100% compliance on all waivers for any public contact. Publish year end car safety check numbers.

6.1.5 Results: All Car seat safety checks were done for no charge and 12/12 waivers were signed and filed for 100% of participants.

Goal 6.2 – Ensure facilities are clean and in good repair, resolve maintenance issues in timely manner.

Objective 6.2.1 – Continue the station inspection program that identifies equipment or facilities that are in disrepair.

- i. Measurement: Ensure compliance with all Station Captains that the Daily/ Weekly station inspections are being conducted and completed through the online platform provided. Goal is 90% of all station inspection forms completed per shift.

6.2.1 Results: Station Check Results:

- 9 – Station Checks: 137/ 334 = 41%
- 10 – Station Checks: 192/ 334 = 57%
- 19 – Station Checks: 134/ 334 = 40%

6.2.1 Results: All station checks moved to First Due software and completed during morning checks by station officer.

Objective 6.2.2 – Address facility problems expeditiously with updated equipment and practices.

- i. Measurement: Using the online platform, complete station and equipment issues by completing requested work orders.

6.2.2 Results: Completed, see results published in 6.2.1

7 General Organizational Goals



Goal 7.1 – Improve interdepartmental training in compliance with ISO and NFPA standards that are specific to Destin Fire Control District’s standard operating procedures.

Objective 7.1.1 – Continue to review, edit, and create company performance drills that are specific to Destin Fire Control District’s training procedures.

- i. Measurement: Evaluate the effectiveness of the District’s Training program after the year end and evaluate the overall performance of company drills per shift/ station.

7.1.1 Results: All company drills were completed per shift/ station in FY 24-25. Performance metrics were above average and additional drills added to FY 25-26.

Objective 7.1.2 – Continue evaluating the feasibility of constructing a Destin Fire Control District training facility.

Objective 7.1.3 – Implement an annual department-wide officer’s meeting that provides a platform that encourages communication and growth.

- i. Measurement: Hold a department-wide mandatory officer’s meeting bi-annually for FY 24-25. Meeting is to be held at St. 9 and meeting minutes published in the year end report.

7.1.3 Results: Required officer meeting, including recently promoted officers in September of 2025. Scheduled Bi-annual dates for FY 25-26 (March/ Sept). No minutes completed as not required.

- 8/9 Captains’ in attendance w/ 9th on Zoom call in. 100% compliance for single meeting.
- Only ½ required officer meetings completed in FY 24-25 due to retirement window and promotional timing.