

NORTH PORT FIRE RESCUE NORTH PORT, FL

STRATEGIC PLAN REPORT

**5-YEAR STRATEGIC PLAN
2025 - 2029**

FY2026 Update



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Message from the Fire Chief



North Port Community, City Commissioners, City Management Team, and Fire Family,

It is my privilege to present the FY2026 Update of the 2025–2029 Strategic Plan. This plan is a living document that reflects who North Port Fire Rescue is, what the department values, and how it will continue to serve the community with purpose and professionalism. It affirms the department’s mission to provide exceptional public safety services in a safe, compassionate, and professional manner, and it supports the vision of delivering first-class fire, EMS, and public safety services while maintaining a customer-first model.

The direction outlined in this update was shaped through collaboration and honest evaluation. Internal stakeholder input, external community feedback, SWOT analysis, and the department’s community risk assessment and standards of cover work all contributed to a clearer understanding of current needs, future challenges, and opportunities for improvement. This plan was not built from the top down. It reflects the work, insight, and shared commitment of the entire organization and the community it serves.

I extend my sincere appreciation to the personnel, City staff, community leaders, citizens, firefighters, fire officers, administrative staff, and all others who contributed their time, expertise, and perspective to this effort. Their participation strengthened the plan and reinforced the importance of collaboration, accountability, and public trust in everything North Port Fire Rescue does.

Over the planning period, this strategic plan will guide priorities, resource decisions, and performance expectations. It will also remain subject to review and refinement through the department’s ongoing planning and accountability process, ensuring that North Port Fire Rescue continues to adapt responsibly while staying focused on its mission.

I am confident in the dedication, professionalism, and service-minded commitment of the North Port Fire Rescue team. Together, the department will continue to honor the trust placed in it by the community and will remain focused on providing safe, compassionate, and professional service every day.

A handwritten signature in blue ink, appearing to read "Scott A. Titus". The signature is fluid and cursive, written over a white background.

Scott A. Titus

Fire Chief

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Organizational Background and Introduction

The City of North Port is the southernmost city in Sarasota County, situated midway between Tampa and Fort Myers, and shares common borders with Charlotte and DeSoto Counties. The city spans approximately 104 square miles, of which 99.38 square miles is land, making it one of the largest cities in Florida by land area. North Port Fire Rescue is an ISO 1 rated agency providing emergency services to an estimated population of 97,000 residents and visitors. The department was established in 1961 as a volunteer organization, transitioned to an all-hazards career agency in 1983.

North Port Fire Rescue is staffed by 163 career professionals and responds from six strategically located stations throughout the city, each anchoring a designated geographical planning zone with resource allocation strategies based on measured risk. The service delivery inventory includes three engines, three ladder trucks, seven advanced life support rescue units, one tanker, and two command vehicles providing 24-hour coverage year-round. Station 86, serving the Wellen Park community, is operated jointly with the Sarasota County Fire Department under a shared facility agreement between the City of North Port and Sarasota County. Through additional interlocal, mutual and automatic aid agreements, the department also serves portions of unincorporated Sarasota County. NPFR has two primary funding sources; non-ad valorem assessment revenues for the provision of fire suppression operations through the dependent special purpose district, and ad valorem tax revenues to the General Fund for the provision of ALS operations.

The department provides fire suppression, advanced life support emergency medical services, hazardous materials response, technical rescue, fire prevention and community risk reduction. In 2025, North Port Fire Rescue responded to over 11,000 calls for service. The department earned accreditation from the Commission on Accreditation of Ambulance Services in 2024 and, in 2025, became the first fire department in Florida to receive Gold Tier recognition in the Prehospital Pediatric Readiness Recognition Program. The pursuit of accreditation through the Center for Public Safety Excellence represents the next milestone in the department's continuous improvement trajectory.

The City of North Port maintains an open Geographic Information Systems portal through which city departments manage roads, utilities, public services, drainage, and public safety data. The portal provides interactive maps, station boundaries, and government mapping resources optimized for web and mobile access and supports the department's planning zone analysis and risk-based resource allocation work.

External Community Feedback

In February 2025, North Port Fire Rescue convened a Community Luncheon as part of the strategic planning process facilitated by Fitch & Associates. The session brought together a cross-section of external stakeholders, including elected officials, city management, hospital and healthcare system representatives, business leaders, nonprofit partners, and regional public safety agency leadership. Participants were asked to share their perspectives on service delivery, areas for improvement, and opportunities for greater community connection.

WHAT IS WORKING WELL

Responsive and Compassionate Service — External stakeholders noted the department’s rapid and caring response, citing both practical effectiveness and emotional reassurance provided to individuals during emergency situations.

Strong Community Presence — The department’s community partnerships, public education programs, and neighborhood visibility were widely recognized as valuable contributions to public safety and community trust.

Personnel Programs — Department personnel were consistently described as professional, reliable, and respectful, reinforcing positive relationships between the agency and the residents it served.

AREAS FOR ENHANCEMENT

Public Education on Fire and EMS Operations — Stakeholders noted that while residents value the services provided, many lack an understanding of operational protocols, such as the circumstances that necessitate ladder truck responses or the qualifications of responding crews. A more active public education effort was identified as a priority.

Awareness of Community Programs — Programs such as CPR training and department lead community education were described as well-regarded but not widely known. Stakeholders recommended more consistent, visible outreach to increase participation and community engagement.

OPPORTUNITIES FOR CHANGE

Dispatch Integration — Stakeholders identified an opportunity to strengthen connections between dispatch personnel and field crews to support team resilience and behavioral health, particularly after high-acuity incidents.

Cadet and Youth Programs — Community members expressed support for programs that introduce youth to careers in emergency services, identifying cadet pathways as a mechanism to support long-term recruitment and workforce development.

Senior-Focused Communications — Reaching older residents with critical safety information was identified as a gap, and stakeholders recommended targeted strategies through print media, telephone outreach, and partnerships with senior centers.

Agency Mission, Values, and Vision

Internal stakeholders participated in a structured review of the department's mission, vision, and values during the February 2025 strategic planning workshop facilitated by Fitch & Associates. Through facilitated discussion and consensus-building exercises, the group affirmed the guiding principles that shape organizational culture, decision-making, and long-term direction. These statements remain in effect for the FY2025–FY2029 planning period.

Mission Statement

Provide Exceptional Public Safety Services in a Safe, Compassionate and Professional Manner.



VISION STATEMENT

Our Vision is to provide first class fire, EMS, and public safety services to this community and to create and maintain a predictable, sustainable economic future. We will maintain a “customer first” service model to our internal and external customers while representing, supporting, and maintaining our fire department and city *family* with pride and honor.

- **We will** recruit, hire, train, and retain exceptional personnel that will endeavor to meet and honor our mission, maintain the public trust, be innovative and efficient in thoughts and actions, and maintain collaborative relationships between leadership, workforce, and all other stakeholders for their service career.
- **We will** enjoy every tour of duty, love and honor this career, and always strive to be our best. We will honor both names on our turnout coats and uniforms equally understanding that just like the two names, we have two families; our city family and our birth family.
- **We will** exercise selfless devotion to career while helping each other maintain physical, mental, and emotional wellbeing for each of our members.
- **We will** plan for success and succession because we know that hoping for them is ineffective and purposeful actions and participation will position us for the future.
- **We will** lead, responsive to our stakeholders; internal and external.
- **We will** challenge the status quo in pursuit of efficiency and effectiveness through innovation, accountability, and professional growth as individuals and as a team.
- **We will** develop and maintain strategic partnerships throughout the city and community that help us address the unique challenge of rapid growth while promoting personalized service delivery with the highest quality of pride and professionalism.
- **We will** pursue International Accreditation; not for the recognition but for the internal evaluation and the processes that continually promote our efficiency and effectiveness.

We will be successful through continued execution of funding policies for strategic reserves and capital acquisition accounts that bolster fiscal responsibility and position this Fire Rescue Department to successfully meet the defined level of service delivery that this community has come to expect even during times of economic difficulty and/or uncertainty.

Identification of Critical Issues and Service Gaps

The Fitch and Associates plan, completed in February 2025, did not include a formal identification of critical issues or service gaps as a discrete step in the planning process. The original six pillars, Emergency Services, Training, Prevention and Community Risk Reduction, EMS, Administration, and Emergency Management, were structured to reflect the department's existing organizational divisions rather than the risks and service challenges identified through a systematic environmental scan. While that framework produced actionable goals, it did not establish an explicit link between community risk data, stakeholder findings, and organizational priorities.

During the development of the Community Risk Assessment and Standards of Cover and the Self-Assessment Manual in 2025 and 2026, leadership determined that a more rigorous foundation was required. A structured environmental scan was conducted, incorporating feedback from 114 personnel through an internal survey, findings from the CRA/SOC risk and performance analysis, and results from the community stakeholder luncheon held in February 2025. The results were analyzed through the strengths, weaknesses, opportunities, and threats framework.

SWOT Analysis

	STRENGTHS	WEAKNESSES
INTERNAL	<ul style="list-style-type: none"> • Strong organizational culture • Safety-conscious workforce • Adaptive and collaborative team structure • High performance standards • Fiscally responsible operations • Officer development core • Consistent attainment of performance benchmarks 	<ul style="list-style-type: none"> • Internal information delivery gaps • Challenges associated with rapid growth • Recruitment competitiveness • Young departmental age • Succession planning framework • Residual hurricane damage to facilities • After-action item tracking and closure
	OPPORTUNITIES	THREATS
EXTERNAL	<ul style="list-style-type: none"> • External communication channels • Pre-planning for future service demand • Regional training partnerships • Fleet collaboration programs • Local government relationship development • Fire Academy establishment • Community paramedicine program 	<ul style="list-style-type: none"> • Cultural insularity risk • Natural disaster exposure • Pandemic-related service disruption • Emerging technology displacement • Increased public scrutiny • Cohabitation and interoperability complexity • Funding constraints • Apparatus replacement pressure

Critical Issues and Service Gaps

Analysis of the SWOT findings revealed consistent patterns across the four quadrants. Internal weaknesses in recruitment, succession planning, and information delivery align with external threats posed by rapid population growth, funding constraints, and increased public scrutiny. Taken together, these patterns identify workforce and organizational stability as a primary area of concern if ignored. Internal strengths in clinical performance and community partnerships, read alongside external opportunities in community paramedicine and public education, point toward unmet potential in risk reduction and clinical advancement. Weaknesses in fleet management, technology integration, and after-action review processes, when considered alongside threats from technological displacement and pressure to replace apparatus, define infrastructure modernization as a gap requiring focused attention.

Rather than organizing priorities along divisional lines, North Port Fire Rescue translated these patterns into twelve Pillar Domains. Each domain represents a specific gap or opportunity identified through the environmental scan and is anchored by a focused purpose statement grounded in one or more SWOT quadrants. The twelve domains are presented below without reference to their eventual pillar groupings; the relationship between domains and pillars is established in the section that follows.

Pillar Domain	SWOT Grounding	Focus
Incident Preparedness	<i>Weaknesses (after-action tracking, major incident complexity) + Threats (call volume growth)</i>	Validated, tested response plans for all identified major incident threat types, with trained personnel and exercised protocols that support effective activation under any hazard scenario.
Equipment, Logistics, and Readiness	<i>Weaknesses (apparatus replacement pressure, logistics gaps) + Threats (growth demands)</i>	A resilient logistics program that keeps apparatus, PPE, and operational supplies mission-ready through standardized inventory management, lifecycle planning, distributed resource hubs, and continuity safeguards.
Interagency Collaboration	<i>Weaknesses (interoperability gaps) + Threats (cohabitation complexity, mutual aid demand)</i>	A strengthened mutual aid posture through formalized agreements, closed communications interoperability gaps, and joint training relationships with primary partner agencies.
Succession and Development	<i>Weaknesses (recruitment, succession planning, young departmental age) + Opportunities (Fire Academy)</i>	A pipeline of credentialed, career-ready personnel built through identified succession gaps, targeted professional programs, and workforce growth plans aligned to projected community demand.

Pillar Domain	SWOT Grounding	Focus
Training Operations	<i>Weaknesses (training division structure) + Opportunities (regional training partnerships)</i>	A structured, regionally recognized training division with accredited programs, educational partnerships, and delivery capacity supporting both internal development and broader community training goals.
Culture and Employee Wellness	<i>Weaknesses (behavioral health support gaps, internal communication, culture under high-growth pressure) + Threats (burnout, insularity risk)</i>	A department culture that actively supports the physical, behavioral, and professional well-being of every member, paired with structured internal communication that keeps all shift-based personnel connected to department direction and leadership.
Data and Risk Assessment	<i>Weaknesses (absence of data-driven CRR baseline) + Opportunities (multi-source data integration)</i>	All CRR activity is grounded in current, multi-source community risk data — establishing a baseline, tracking program performance, and producing regular analytical reports that drive resource and program decisions.
Program Development and Delivery	<i>Strengths (community presence) + Opportunities (public education expansion) + Threats (public scrutiny)</i>	A portfolio of risk reduction programs addressing the community’s highest-priority hazards with measurable outcomes, sufficient staffing, and responsive improvement cycles.
Community Engagement	<i>Opportunities (youth pathways, paramedicine, senior outreach) + Threats (underserved populations)</i>	Expanded public presence and trust through youth pathways, a trained community outreach team, and deliberate effort to reach populations not yet covered by active programs.
Accreditation and Compliance	<i>Weaknesses (records systems, policy review gaps) + Threats (technology displacement)</i>	CFAI, ISO 1, and CAAS accreditation standing sustained through disciplined annual compliance cycles, centralized records management, and a culture of continuous process improvement.
Clinical Quality	<i>Strengths (performance standards, EMS quality) + Opportunities (hospital partnerships)</i>	Measurably excellent pre-hospital care through monitored cardiac and EMS performance metrics, protocol alignment to best practice, and identification of coverage gaps that inform resource and staffing decisions.
Innovation and Advanced Programs	<i>Strengths (EMS program quality) + Opportunities (community paramedicine, MIH, specialty transport)</i>	Advanced clinical capabilities developed through Mobile Integrated Healthcare and specialty EMS programs that are grounded in feasibility analysis, community need, and sustainable operational frameworks.

Identification of Strategic Initiatives

The four new strategic pillars for the period FY2026–FY2029 in the strategic plan were developed in direct response to the critical issues identified through the environmental scan. This approach represents a deliberate departure from the structure of the original Fitch-facilitated plan, in which pillars were organized to reflect the department’s existing organizational divisions rather than the risks and service gaps identified through stakeholder and data analysis.

Original Pillar Structure (Fitch Plan, FY2025)

The February 2025 plan established six pillars aligned with the organization's functional divisions. Emergency Management was treated as a discrete pillar. Personnel Health and Wellness was not identified as a strategic priority independent of training. No explicit link was drawn between the pillars and a formal identification of critical issues or service gaps.



Revised Pillar Structure (FY2026–FY2029)

The SWOT analysis produced twelve discrete areas of organizational focus, covering gaps to close, capabilities to build, and opportunities to pursue, each grounded in one or more quadrants of the environmental scan. These became the twelve Pillar Domains. With the domains defined, department leadership, program stewards, and subject matter experts developed 49 Domain Goals spanning fiscal years 2026 through 2029 to directly address the conditions identified in each domain. Each goal was written to target a specific gap or opportunity, with measurable outcomes and a defined fiscal year target.

When the 49 goals were examined as a set, a natural grouping emerged. Goals with related operational focus, shared resource dependencies, and aligned stewardship clustered together, and the four Pillars took shape from that pattern. Rather than imposing a structure and distributing goals to fill it, the Pillar framework was built from the goals themselves. The result is four Pillars: Operational Readiness and Deployment, Workforce Development and Succession, Community Risk Reduction and Public Education, and Professional Standards and Service Excellence, each representing a coherent body of work with a direct line to the conditions identified in the SWOT analysis.

To manage that body of work, North Port Fire Rescue assigned a Pillar Steward to each pillar and designated goal owners responsible for driving execution of individual goals. This structure

distributes accountability across the organization and keeps progress visible at both the goal and pillar levels. It also provides the Authority Having Jurisdiction with a clear and consistent account of the department's standing relative to its commitments at each annual reporting cycle.

Pillar	Strategic Initiative	Pillar Domains	SWOT Grounding
P1	Operational Readiness and Deployment	<ul style="list-style-type: none"> Incident Preparedness Equipment, Logistics, and Readiness Interagency Collaboration 	<i>Weaknesses (after-action, growth) + Threats (call volume, cohabitation)</i>
P2	Workforce Development and Succession	<ul style="list-style-type: none"> Succession and Development Training Operations Culture and Employee Wellness 	<i>Weaknesses (recruitment, succession) + Opportunities (training partnerships, Fire Academy)</i>
P3	Community Risk Reduction and Public Education	<ul style="list-style-type: none"> Data and Risk Assessment Program Development and Delivery Community Engagement 	<i>Strengths (community presence) + Opportunities (paramedicine, public education)</i>
P4	Professional Standards and Service Excellence	<ul style="list-style-type: none"> Accreditation and Compliance Clinical Quality Innovation and Advanced Programs 	<i>Strengths (performance standards, EMS quality) + Weaknesses (fleet, records, policy)</i>

Strategic Plan Purpose Statement:

North Port Fire Rescue grounds all fiscal decisions in advancing its public safety mission, with resource allocation guided by community risk data, industry standards, and accreditation requirements, so that every public dollar invested in the department produces measurable, mission-driven value.

Pillar Purpose Statements

P1: Operational Readiness and Deployment

Maintain and advance NPFR's capacity to respond safely and effectively to all emergency incidents within the community, with a well-equipped, well-positioned, and well-prepared operational force.

Incident Preparedness

Ensure NPFR maintains validated, tested response plans for all identified major incident threat types, with trained personnel and exercised protocols that support effective activation under any hazard scenario.

Equipment, Logistics, and Readiness

Sustain a resilient logistics program that keeps apparatus, PPE, and operational supplies mission-ready through standardized inventory management, lifecycle planning, distributed resource hubs, and continuity safeguards.

Interagency Collaboration

Strengthen NPFR's mutual aid posture by formalizing agreements, closing communications interoperability gaps, and building joint training relationships with primary partner agencies.

P2: Workforce Development and Succession

Develop, retain, and advance a skilled, credentialed, and resilient workforce through purposeful succession planning, training excellence, and a strong organizational culture.

Succession and Development

Build a pipeline of credentialed, career-ready personnel by identifying succession gaps, developing targeted professional programs, and executing workforce growth plans that align staffing to projected community demand.

Training Operations

Establish a structured, regionally recognized training division with accredited programs, educational partnerships, and delivery capacity that supports both internal development and broader community training goals.

Culture and Employee Wellness

Foster a department culture that actively supports the physical, behavioral, and professional well-being of every member, and maintains strong internal communication and cohesion at all organizational levels.

P3: Community Risk Reduction and Public Education

Reduce community risk and enhance public safety through data-driven prevention programs, targeted education, and meaningful community engagement.

Data and Risk Assessment

Ground all CRR activity in current, multi-source community risk data — establishing a baseline, tracking program performance, and producing regular analytical reports that drive resource and program decisions.

Program Development and Delivery

Design, launch, and continuously refine a portfolio of risk-reduction programs that address the community's highest-priority hazards, with measurable outcomes, sufficient staffing, and responsive improvement cycles.

Community Engagement

Expand NPFR's public presence and trust through youth pathways, a trained community outreach team, and deliberate effort to reach underserved populations not yet covered by active programs.

P4: Professional Standards and Service Excellence

Uphold the highest standards of accreditation, clinical quality, and service innovation to ensure NPFR remains a model organization committed to continuous improvement.

Accreditation and Compliance

Achieve and sustain CFAI, ISO 1, and CAAS accreditation standing through disciplined annual compliance cycles, centralized records management, and a culture of continuous process improvement.

Clinical Quality

Deliver measurably excellent pre-hospital care by monitoring cardiac and EMS performance metrics, aligning protocols to best practice, and identifying coverage gaps that support resource and staffing recommendations.

Innovation and Advanced Programs

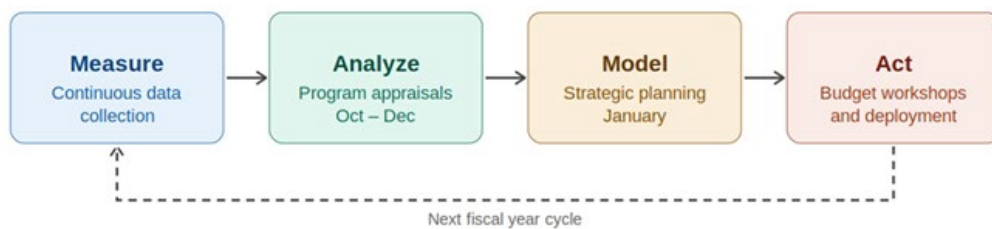
Advance NPFR's clinical capabilities by developing and launching Mobile Integrated Healthcare and specialty EMS programs grounded in feasibility analysis, community need, and sustainable operational frameworks.

Updated Performance Maintenance and Accountability

Implementation of this strategic plan requires a structured review framework that sustains momentum, surfaces obstacles early, and creates a formal record of progress for the accreditation process. North Port Fire Rescue has adopted a three-tier review cadence that

distributes accountability across operational and command levels while maintaining the plan as a living document.

The strategic plan is not a static record of intent. It is an active management instrument, and its value is determined by the discipline with which it is reviewed, updated, and connected to the broader organizational systems that govern resource allocation and service delivery. North Port Fire Rescue has deliberately aligned the strategic planning cycle with two parallel processes: the annual program appraisal cycle established in the CRA/SOC and the City of North Port's budget development calendar. This alignment is intentional and structural. Strategic priorities inform budget requests, and budget decisions shape what goals can be advanced in a given fiscal year. Neither process operates in isolation from the other.



The CRA/SOC establishes a four-phase performance management methodology, Measure, Analyze, Model, Act, that governs how the department collects response data, evaluates system performance, models deployment alternatives, and translates findings into authorized action. The strategic plan operates within the same rhythm. Continuous data collection through the department's CAD pipeline and QA/QI function feeds quarterly performance reporting throughout the fiscal year. Following the close of the fiscal year on September 30, the Compliance Team conducts program appraisals across all service delivery areas, assessing performance trends, identifying gaps relative to adopted benchmarks, and evaluating changes in community risk or demand within each planning zone. All appraisals are completed by December 31.

Those findings flow directly into the annual strategic planning session held each January, where the Fire Chief, command staff, and Pillar Stewards review the prior year's performance data alongside goal and task completion status. January is the deliberate entry point for the next fiscal year's planning work. It positions the department ahead of the City's budget workshop cycle, which typically opens in the spring, and ensures that resource requests are grounded in documented performance findings rather than developed in parallel with financial discussions. At this session, Pillar Domain Goals and their associated tasks are reviewed and reconciled against the appraisal findings. Goals may be modified, placed on hold, or retired based on operational realities, changes in community risk, or budgetary constraints. New priorities that

surfaced during the appraisal process may be incorporated into the goal set. The planning session concludes with a prioritized set of recommendations carried into the budget workshop cycle, so that requests presented to the Authority Having Jurisdiction reflect current performance data and validate organizational need.

The connection between Pillar Domain Goals, program appraisals, and the City's financial calendar is not incidental. Tasks assigned within each domain goal carry fiscal year targets that correspond directly to the City's October 1 budget cycle. When a task is assigned a target of fiscal year 2027, that assignment reflects a planned dependency on resources authorized through the FY2027 budget process. This structure allows the department to present the Authority Having Jurisdiction with a clear line of sight from identified community risk and performance gaps through to the specific goals, tasks, and funding requests designed to address them.

Goal and task status are maintained in a versioned data file and reflected in real time on the department's internal strategic plan dashboard. The dashboard presents completion status by pillar and fiscal year, goal dependency chains, and a full changelog of all status updates. The appendix sections of this document are generated from the same data source at each reporting cycle, so the published record reflects the plan's state at the time of generation.

Review Cadence

Review Level	Description
Bi-Weekly — Pillar Check-In	Teams representing each pillar functional area conduct a standing meeting to address four questions: key accomplishments from the last meeting, lessons learned, priorities for the upcoming period, and support needed. These sessions maintain ongoing alignment with the strategic plan and provide an early-warning mechanism for tasks at risk of delay.
Quarterly — Command Staff Review	At each quarterly command staff meeting, goal and task status is updated to reflect the current state: Not Started, In Progress, or Complete. The four standing discussion questions are applied at the organizational level, and findings are cross-referenced with the quarterly performance report produced by the Compliance Team. Status updates are recorded in the plan tracker and reflected in the published dashboard, creating a timestamped audit trail for accreditation purposes.
Annual — Full Strategic Review	The full strategic planning team convenes each January, following completion of all CRA/SOC program appraisals and prior to the opening of the City's budget workshops. The session assesses accomplishments from the prior fiscal year, identifies key learnings, and establishes priorities for the coming year. Pillar Domain Goals and associated tasks are reconciled against performance data, community risk findings, and anticipated resource availability. The overall pillar structure and goal set are reviewed to confirm continued alignment with the department's mission and CRA/SOC findings. Recommendations from this session are carried into the budget development process and serve as the basis for the department's formal reporting to the Authority Having Jurisdiction.

Strategic Pillars Overview

The following section provides a consolidated view of the four strategic pillars that structure this plan. Each pillar is organized around a set of specific goals distributed across the remaining four fiscal years of the planning period. The table below summarizes goal and task counts by pillar; the individual goal entries with supporting tasks and success metrics follow in the subsequent fiscal year sections.

Pillar	Name	Domains	Goals	Tasks
P1	Operational Readiness and Deployment	<ul style="list-style-type: none"> Incident Preparedness Equipment, Logistics, and Readiness Interagency Collaboration 	10	46
P2	Workforce Development and Succession	<ul style="list-style-type: none"> Succession and Development Training Operations Culture and Employee Wellness 	16	71
P3	Community Risk Reduction and Public Education	<ul style="list-style-type: none"> Data and Risk Assessment Program Development and Delivery Community Engagement 	11	44
P4	Professional Standards and Service Excellence	<ul style="list-style-type: none"> Accreditation and Compliance Clinical Quality Innovation and Advanced Programs 	12	55
TOTAL	4 Pillars · 12 Domains		49	216

Completed- Goals, Objectives, Critical Tasks FY2025

In FY2025, North Port Fire Rescue previously operated under a six-pillar strategic structure consisting of Emergency Services, Training, Prevention and Community Risk Reduction, EMS, Administration, and Emergency Management. All goals identified for that fiscal year were completed. The table below presents each completed goal alongside its original pillar assignment and maps it forward to the Pillar and Pillar Domain it most directly supports within the current four-pillar framework.

Emergency Management is presented separately. A significant FY2025 achievement was the establishment of Emergency Management as an independent division with dedicated leadership, a defined staffing plan, and its own strategic direction. The three Emergency Management goals completed in FY2025 supported that transition and do not carry forward into the current strategic framework. Future Emergency Management planning is maintained independently by the Emergency Management Division.

P1: Operational Readiness and Deployment

Original Pillar	Pillar Domain	FY25 Goal
Emergency Services	<i>Equipment, Logistics, and Readiness</i>	COMPLETED: Identify cost-effective solutions for long-term fleet operations and sustainability
Emergency Services	<i>Equipment, Logistics, and Readiness</i>	COMPLETED: Develop a structured 5-year apparatus procurement plan
Emergency Services	<i>Equipment, Logistics, and Readiness</i>	COMPLETED: Identify and secure funding for the procurement plan

P2: Workforce Development and Succession

Original Pillar	Pillar Domain	FY25 Goal
EMS	<i>Succession and Development</i>	COMPLETED: Field Training Officer Apprenticeship — establish program, policy, PDP, and implementation
Training	<i>Training Operations</i>	COMPLETED: Identify training needs for efficiency by Q3
Training	<i>Training Operations</i>	COMPLETED: Evaluate current training plan against identified training needs
Training	<i>Training Operations</i>	COMPLETED: Develop job-specific training plans with performance metrics and standardized lesson plans

P3: Community Risk Reduction and Public Education

Original Pillar	Pillar Domain	FY25 Goal
Administration	<i>Program Development and Delivery</i>	COMPLETED: Reduce staff time dedicated to the smoke detector program through delivery streamlining
EMS	<i>Community Engagement</i>	COMPLETED: Cadet Program — develop policies, assign advisors, and implement program in year one
Prevention/CRR	<i>Community Engagement</i>	COMPLETED: Develop four ways to interact with the community across generation gaps
Prevention/CRR	<i>Community Engagement</i>	COMPLETED: Develop two engagement methods within 25% of local schools
Prevention/CRR	<i>Program Development and Delivery</i>	COMPLETED: Hire one dedicated CRR/CRA and public outreach staff position by fiscal year-end

P4: Professional Standards and Service Excellence

Original Pillar	Pillar Domain	FY25 Goal
EMS	<i>Accreditation and Compliance</i>	COMPLETED: Transition to CAAS Accreditation 4th Edition — evaluate requirements, close gaps, and achieve proofs of compliance

Emergency Management — Division Independence Achieved in FY25

The three Emergency Management goals completed in FY2025 were foundational to establishing EM as an independent division within the City of North Port. These goals are not carried forward into the NPFR strategic framework; all future EM planning is maintained independently by the EM Division.

Original Pillar	Pillar Domain	FY25 Goal
Emergency Management	N/A — Not carried forward	COMPLETED: Break ground on new Emergency Operations Center by September 2025
Emergency Management	N/A — Not carried forward	COMPLETED: Expand EOC program staffing and implement E-role positions by May 2025
Emergency Management	N/A — Not carried forward	COMPLETED: Develop and execute EM staffing expansion plan by September 2025

Goals, Objectives, Critical Tasks and Timelines — FY26

P1: Operational Readiness and Deployment

Goal	Statement / Success Metric	Domain
P1.26.G1	Develop and validate a comprehensive major incident response plan for each identified threat type within NPFR's response model, with at least one plan tested through a full-scale or functional drill by Q4.	Incident Preparedness
T1	Identify major incident threat types across all hazard types.	
T2	Develop a response plan for each identified threat.	
T3	Plan and conduct a large-scale drill including active shooter scenario.	
T4	Re-evaluate plans following drill and identify additional needs.	
T5	Document plans and establish a regular review cycle.	
P1.26.G2	Develop and implement a comprehensive station facility maintenance monitoring program that identifies all high-use items by responsible party (Facilities or FD), establishes service and replacement schedules for each category, and creates an internal tracking system to ensure timely completion of all maintenance actions by Q4.	Equipment, Logistics, and Readiness
T1	Review and document items serviced by Facilities (A/C, garage doors, landscaping, etc.) and establish an internal monitoring process to track and prompt completion.	
T2	Identify and inventory all station items not covered by Facilities (stoves, ovens, mattresses, gym equipment, cascade systems, extractors, etc.) requiring FD-managed service schedules.	
T3	Explore service contracts with applicable vendors for FD-managed equipment and document service and replacement schedules for all identified items.	
T4	Develop a budget line item reflecting ongoing service and replacement costs for station equipment.	

P2: Workforce Development and Succession

Goal	Statement / Success Metric	Domain
P2.26.G1	Develop and adopt a written department-wide succession plan that identifies all personnel eligible to separate within five years, maps critical position vacancies, and assigns developmental actions to identified successors by Q4.	Succession and Development

Goal	Statement / Success Metric	Domain
T1	Identify personnel leaving within the next five years.	
T2	Develop written succession plan.	
T3	Review NFPA standards.	
T4	Survey local and regional departments.	
P2.26.G2	Complete a full audit of the Officer Development Program, revise curriculum and job descriptions to reflect current competency expectations and CFAI credentialing categories, and relaunch with a documented delivery schedule by Q4.	Succession and Development
T1	Update and revise job descriptions.	
T2	Develop education program.	
T3	Collect and review feedback forms.	
T4	Relaunch revised ODP with defined enrollment criteria and delivery schedule.	
P2.26.G4	Implement a targeted recruitment program that includes formal partnerships with a minimum of four local technical schools, a functioning online recruitment portal, standardized interview questions, a documented scoring system, and an active recruitment committee by Q4.	Succession and Development
T1	Evaluate last fiscal year's applicant pool.	
T2	Partner with four local technical schools.	
T3	Develop an online recruitment portal with QR code access.	
T4	Develop standardized interview questions and a documented scoring system.	
T5	Establish a recruitment committee.	
P2.26.G3	Establish documented roles, responsibilities, and reporting structure for all training division positions, and implement a continuous evaluation framework for workload, span of control, and operational needs by Q3.	Training Operations
T1	Assess current staffing and workload distribution.	
T2	Develop clear job descriptions and roles for specific training functions.	
T3	Establish reporting structure for division oversight.	
T4	Implement a continuous evaluation process for workload and span of control.	

P3: Community Risk Reduction and Public Education

Goal	Statement / Success Metric	Domain
P3.26.G1	Gather, organize, and evaluate community risk data from five sources including ImageTrend, police reporting, GIS, Mobile-Eyes, and regional data, and deliver a ranked baseline risk report identifying highest-priority program areas to the CRR team by Q2.	Data and Risk Assessment
T1	Access and compile data from ImageTrend, police reporting, GIS, Mobile-Eyes, and regional sources.	
T2	Organize data and rank by importance, financial impact, and organizational capacity.	
T3	Evaluate data to identify highest-priority risk areas for program development.	
T4	Document baseline findings and present to CRR team.	
P3.26.G2	Design and launch two new community risk reduction programs targeting the highest-priority risk categories identified in the FY26	

Goal	Statement / Success Metric	Domain
	baseline report, including a formalized Elementary School CRR Education program and a Senior Public Education program, with both programs operational and baseline data collection underway by Q4. ⚠ Depends on: P3.26.G1	Program Development and Delivery
T1	Establish programs based on greatest identified need from data evaluation.	
T2	Formalize Elementary School CRR Education program.	
T3	Formalize Senior Public Education program.	
T4	Formalize SOGs for Fire Marshal program delivery.	

P4: Professional Standards and Service Excellence

Goal	Statement / Success Metric	Domain
P4.26.G1	Achieve CFAI accreditation candidate status by formalizing the Accreditation SOG, implementing compliant processes across all applicable categories, gathering documented proof of compliance, and submitting the CFAI candidate application by Q4.	Accreditation and Compliance
T1	Strategic Plan adopted by the AHJ	
T2	Implement processes and move toward best practice alignment.	
T3	Gather proof of compliance.	
T4	Achieve CFAI applicant status.	
T5	CRA SOC adopted by the AHJ	
P4.26.G2	Complete all ISO 1 annual compliance requirements including needs assessment, departmental collaboration, data documentation, and proof of compliance, and deliver a site visit readiness package by Q4.	Accreditation and Compliance
T1	Review all criteria required to maintain ISO 1.	
T2	Assess organizational needs against ISO requirements.	
T3	Assign needs and collaborate with other departments.	
T4	Document all required data and proof of compliance.	
T5	Prepare for ISO site visit.	
P4.26.G3	Achieve the AHA Mission Lifeline Gold Rating by monitoring all required cardiac care metrics quarterly, verifying protocol alignment with current best practices, and submitting a complete Mission Lifeline application with supporting data by Q4.	Clinical Quality
T1	Monitor current and future metrics.	
T2	Ensure protocols continue to meet best practices.	
T3	Quarterly reporting of data.	
T4	Submit measures for Mission Lifeline Gold Rating evaluation.	

Goals, Objectives, Critical Tasks and Timelines — FY27

P1: Operational Readiness and Deployment

Goal	Statement / Success Metric	Domain
P1.27.G1	Increase the number of Hazardous Materials Technician-certified personnel by a minimum of three, establish a target hazard pre-plan library for all identified city sites, and conduct at least one HOT training or tabletop exercise by Q4.	Incident Preparedness

Goal	Statement / Success Metric	Domain
T1	Increase the number of personnel certified to the Hazardous Materials Technician level to serve as future Fire FTOs.	
T2	Create a target hazard list for the city and develop incident response pre-plans for each site.	
T3	Conduct Hazmat targeted training.	
T4	Evaluate the need for additional equipment to effect safe response and mitigation.	
T5	Complete any needed policy updates.	
P1.27.G2	Conduct a comprehensive PPE inventory assessment, establish minimum reserve inventory standards, develop a long-term lifecycle replacement model with annual funding projections, and implement a sustainable PPE readiness program by Q4.	Equipment, Logistics, and Readiness
T1	Conduct a comprehensive assessment of the department's PPE inventory.	
T2	Develop minimum reserve PPE inventory standards.	
T3	Create a long-term PPE lifecycle replacement model.	
T4	Develop procedures.	
T5	Implement a sustainable PPE readiness program.	
P1.27.G3	Evaluate the need for logistics resource hubs with locker technology at identified station locations, with installed inventory management systems, documented SOGs, trained personnel, and an initial effectiveness evaluation completed by Q4.	Equipment, Logistics, and Readiness
T1	Conduct a needs assessment and geographic analysis.	
T2	Develop a Logistics Resource Hub program.	
T3	Purchase and install inventory management system.	
T4	Develop and implement standard operating guidelines and training for personnel.	
T5	Evaluate the effectiveness of the Logistics Resource Hub program.	

P2: Workforce Development and Succession

Goal	Statement / Success Metric	Domain
P2.27.G1	Complete a comprehensive evaluation of EMS organizational span of control, staffing gaps, and succession needs including QA/QI, accreditation, and specialty program requirements, and present findings with specific recommendations to command staff by Q3.	Succession and Development
T1	Conduct comprehensive review of EMS span of control and organizational responsibilities by Q2.	
T2	Evaluate staffing needs based on projected call volume growth and service demands by Q2.	
T3	Identify future staffing requirements for QA/QI, accreditation, MIH, and specialty programs by Q3.	
T4	Develop succession planning recommendations for EMS leadership positions by Q3.	
P2.27.G2	Conduct a comprehensive evaluation of training academy models, regional partnerships, and facility requirements to determine the feasibility and preferred approach for establishing an NPFR-hosted training academy, and present findings with a recommended implementation pathway to command staff by Q4. ⚠ Depends on: P2.26.G1	Succession and Development

Goal	Statement / Success Metric	Domain
T1	Research existing training academy models at comparable agencies.	
T2	Assess current NPFR training infrastructure, staffing, and resource gaps.	
T3	Evaluate regional partnership opportunities and shared-resource potential.	
T4	Develop feasibility report with cost estimates and recommended approach.	
T5	Present evaluation findings and recommended implementation pathway to command staff by Q4.	
P2.27.G3	Complete a formal evaluation of sleep health challenges facing shift-based personnel, including review of current crew-quarters configuration, existing research on firefighter sleep deprivation, and peer agency solutions, and present findings with recommendations to command staff by Q4.	Culture and Employee Wellness
T1	Review current literature and peer agency practices on firefighter sleep health and shift-based sleep deprivation.	
T2	Survey personnel to assess self-reported sleep quality and identified barriers within current station facilities.	
T3	Evaluate current crew-quarters configuration at each station for adequacy and improvement potential.	
T4	Identify facility and policy solutions including retrofit options, and quiet-hour protocols.	
T5	Present sleep study findings and recommendations to command staff by Q4.	
P2.27.G4	Design and launch a structured internal communication program that establishes regular information flow between command staff and line personnel through scheduled station visits covering all stations at least twice annually, a quarterly department periodical, and a digital communication platform for shift-based staff, with all three components operational by Q4.	Culture and Employee Wellness
T1	Identify avenues for contact and exposure from officer to line personnel.	
T2	Explore creation of rotating schedule for all administrative officers to take turns visiting each station.	
T3	Design and launch a department periodical published at minimum quarterly.	
T4	Evaluate and implement a digital communication platform suitable for shift-based staff.	
T5	Assess program effectiveness at six and twelve months using personnel feedback.	

P3: Community Risk Reduction and Public Education

Goal	Statement / Success Metric	Domain
P3.27.G1	Analyze EMS incident data to identify priority community health risks, develop and launch targeted prevention initiatives addressing CPR, falls, stroke awareness, drowning prevention, and severe weather preparedness, and establish performance measures for all EMS-related CRR activities by Q3.	Program Development and Delivery
T1	Analyze EMS incident data to identify priority community health risks by Q1.	

Goal	Statement / Success Metric	Domain
T2	Develop targeted prevention initiatives addressing CPR, falls, stroke awareness, drowning prevention, and severe weather preparedness by Q2.	
T3	Strengthen partnerships with hospitals and community organizations by Q2.	
T4	Establish performance measures to evaluate EMS-related CRR activities by Q3.	
T5	Complete annual review to ensure outreach efforts align with identified community risks by Q4.	
P3.27.G2	Develop a minimum of three new CRR program policies with supporting content by Q1, and complete phased rollout of a minimum of four CRR programs with Programs 1 and 2 operational by Q3 and Programs 3 and 4 operational by Q4. ⚠ Depends on: P3.26.G1	Program Development and Delivery
T1	Build out three new CRR program policies and supporting content by Q1.	
T2	Identify staffing requirements and incorporate scheduling for program delivery.	
T3	Implement Programs 1 and 2 by Q3.	
T4	Implement Programs 3 and 4 by Q4.	
P3.27.G3	Complete a CRR staffing capacity analysis relative to identified program delivery requirements, present a staffing needs recommendation to command staff by Q3, and establish interim capacity solutions including cross-training and volunteer engagement by Q4.	Program Development and Delivery
T1	Review CRR program workload against identified community risk priorities.	
T2	Evaluate current staffing capacity against program delivery requirements.	
T3	Develop a staffing needs analysis identifying positions required for full program implementation.	
T4	Submit staffing request through appropriate budget and HR channels if confirmed.	
T5	Establish interim capacity solutions including cross-training and volunteer engagement.	

P4: Professional Standards and Service Excellence

Goal	Statement / Success Metric	Domain
P4.27.G1	Advance CFAI accreditation progress by completing all assigned tasks, incorporating 11th edition manual requirements, gathering ongoing proof of compliance across all categories, and reaching the next defined accreditation milestone by Q4. ⚠ Depends on: P4.26.G1	Accreditation and Compliance
T1	Follow up on all currently assigned accreditation tasks.	
T2	Implement processes and continue moving toward best practice alignment.	
T3	Gather ongoing proof of compliance.	
T4	Incorporate 11th edition manual requirements.	
P4.27.G2	Complete CAAS re-accreditation by incorporating all 4th edition manual requirements, obtaining annual proofs of compliance across all applicable categories, submitting the re-accreditation application, completing the PedReady renewal, and achieving a successful on-site review by Q4.	Accreditation and Compliance

Goal	Statement / Success Metric	Domain
	⚠ Depends on: P4.26.G2	
T1	Review CAAS 4th edition manual requirements and identify all applicable changes from the previous accreditation cycle.	
T2	Conduct an internal gap assessment comparing current processes and documentation to 4th edition standards.	
T3	Gather and organize annual proofs of compliance for all required CAAS categories.	
T4	Prepare and submit CAAS re-accreditation application by Q3.	
T5	Conduct internal pre-site-visit readiness review, address identified deficiencies, and prepare staff for on-site evaluation.	
P4.27.G3	Complete an annual analysis of EMS response times, unit utilization, and call demand, map all EMS coverage gaps and high-demand response zones, evaluate rescue staffing models and resource allocation strategies, and present an ALS coverage improvement plan with specific recommendations to executive leadership by Q4.	Clinical Quality
T1	Complete annual analysis of EMS response times, unit utilization, and call demand by Q2.	
T2	Identify and map EMS coverage gaps and high demand response zones by Q2.	
T3	Evaluate rescue staffing models and resource allocation strategies by Q3.	
T4	Present ALS coverage improvement plan to executive leadership by Q4.	

Goals, Objectives, Critical Tasks and Timelines — FY28

P1: Operational Readiness and Deployment

Goal	Statement / Success Metric	Domain
P1.28.G1	Develop and adopt a Logistics Division continuity plan that documents all critical functions, assigns position-specific continuity guides and SOPs, establishes a cross-training program covering all critical roles, and completes a program appraisal by Q4. <i>Metric: Continuity plan adopted with guides for all critical functions. Depends on completion of both PPE program (P1.27.G2) and logistics hubs program (P1.27.G3).</i> ⚠ Depends on: P1.27.G3	Equipment, Logistics, and Readiness
T1	Identify critical logistics functions, systems, responsibilities, and operational processes.	
T2	Develop position-specific continuity guides and standard operating procedures for critical logistics functions.	
T3	Establish a cross-training program.	
T4	Develop a Logistics Division continuity plan.	
T5	Complete program appraisal.	
P1.28.G2	Complete a structured assessment of all mutual aid and automatic aid agreements, radio interoperability, and CAD integration with primary mutual aid partners, and deliver a prioritized gap report to command staff by Q2.	Interagency Collaboration
T1	Compare mutual and automatic aid responses.	
T2	Review department ESZs for coverage and response alignment.	
T3	Assess radio and CAD interoperability with primary mutual aid partners.	
T4	Document findings and prioritize gaps by operational impact.	

Goal	Statement / Success Metric	Domain
P1.28.G3	Develop updated mutual aid agreements, joint training protocols, and communications interoperability solutions addressing all gaps identified in the FY28 assessment, with all draft agreements delivered to partner agencies for review by Q4. ⚠ Depends on: P1.28.G2	Interagency Collaboration
T1	Collaborate with mutual aid partners on updated response procedures.	
T2	Formulate joint interagency training plans.	
T3	Identify technology or protocol solutions for interoperability gaps.	
T4	Draft updated mutual aid agreements where needed.	

P2: Workforce Development and Succession

Goal	Statement / Success Metric	Domain
P2.28.G1	Complete a formal evaluation of EMS supervisory roles, field coverage effectiveness, and future deployment models, and present findings with implementation recommendations to command staff by Q4. ⚠ Depends on: P2.27.G1	Succession and Development
T1	Define EMS supervisor roles, responsibilities, and performance expectations by Q1.	
T2	Evaluate field supervision coverage and operational effectiveness by Q2.	
T3	Assess opportunities for enhanced clinical oversight and workforce development by Q3.	
T4	Develop recommendations for future EMS supervisory positions and deployment models by Q3.	
T5	Present EMS supervisor evaluation findings and implementation recommendations by Q4.	
P2.28.G2	Execute formal partnership agreements with a minimum of four regional educational institutions, establish documented shared-resource access protocols for training infrastructure, and develop a joint recruitment pipeline pathway with at least two institutions by Q4. ⚠ Depends on: P2.27.G3	Training Operations
T1	Strengthen relationships with decision makers at regional educational institutions.	
T2	Establish or maintain articulation agreements with a minimum of four local institutions.	
T3	Inventory potential shared training resources including towers, props, and simulation equipment.	
T4	Develop protocols for shared resource access across partner institutions.	
P2.28.G3	Establish a functioning NPFR Training Academy by implementing the pathway recommended in the FY27 evaluation, securing necessary facility arrangements and partnerships, and delivering a minimum of one formally structured training program to internal personnel by Q4.	Training Operations
T1	Implement facility and partnership agreements identified in FY27 evaluation.	
T2	Develop formal curriculum and delivery structure for inaugural training program.	
T3	Recruit and assign qualified training staff or adjunct instructors.	
T4	Deliver a minimum of one formally structured training program to NPFR personnel by Q4.	

Goal	Statement / Success Metric	Domain
T5	Document program outcomes and identify improvements for FY29 expansion.	Culture and Employee Wellness
P2.28.G4	Implement the sleep health improvement recommendations identified in the FY27 sleep study, including retrofit of individual sleeping rooms at Bryx station and adoption of station-level sleep hygiene protocols, with all primary facility modifications complete by Q4. ⚠ Depends on: P2.27.G3	
T1	Develop project scope and cost estimate for Bryx station individual room retrofit.	
T2	Secure funding and initiate facility retrofit at Bryx station by Q2.	
T3	Develop and distribute station-level sleep hygiene protocols and wellness resources.	
T4	Complete primary facility modifications by Q4 and document outcomes.	
T5	Survey personnel post-implementation to assess improvement in self-reported sleep quality.	

P3: Community Risk Reduction and Public Education

Goal	Statement / Success Metric	Domain
P3.28.G1	Gather updated CRR and EMS program data from all relevant sources, analyze incident trends to identify high-risk populations and areas, and deliver a written report documenting program strengths, weaknesses, and data-driven recommendations for program improvement by Q4. ⚠ Depends on: P3.27.G2	Data and Risk Assessment
T1	Access data from ImageTrend, CARES database, GIS, regional sources, and external surveys.	
T2	Analyze EMS incident data to identify high-risk areas and vulnerable populations.	
T3	Compare previous data to current to identify program performance markers.	
T4	Research and document program strengths and weaknesses for reporting.	
P3.28.G2	Develop a Fire Explorer and Cadet pathway program in partnership with a minimum of two local high schools, conduct annual station visits and career days, and complete a formal program appraisal of the established Cadet Program by Q4.	Community Engagement
T1	Develop a Fire Explorer/Cadet pathway with local high schools.	
T2	Create annual station visits and career days for students.	
T3	Complete program appraisal for established Cadet Program.	
T4	Explore Summer Camp concept.	
T5	Analyze for potential financial impacts or needs.	
P3.28.G3	Establish a Community Outreach Team of trained firefighters capable of supporting public education presentations and community events, with a defined team structure, trained membership, and a minimum of two community events delivered by Q4. ⚠ Depends on: P3.27.G3	Community Engagement
T1	Train firefighters interested in public education.	
T2	Create a group of dedicated members who can assist with presentations and events.	

Goal	Statement / Success Metric	Domain
T3	Analyze impact of line personnel engaged in CRR activities both internally and externally.	
T4	Evaluate the potential of using retired firefighters as volunteers.	

P4: Professional Standards and Service Excellence

Goal	Statement / Success Metric	Domain
P4.28.G1	Develop a centralized digital records management system including a complete record inventory, file mapping, access controls, migration of all active records not meeting retention, and completed disposition of records that have met retention requirements with the Clerk's office by Q4. ⚠ Depends on: P4.27.G2	Accreditation and Compliance
T1	Meet with staff to develop record inventory.	
T2	Develop record library system.	
T3	Migrate records that have not met retention to centralized record library.	
T4	Inventory electronic records having met retention, review with staff, and complete necessary disposals with the Clerk's office.	
P4.28.G2	Develop a Mobile Integrated Healthcare operational framework including target population analysis, partner identification, performance measures, referral pathways, and a financial and staffing feasibility evaluation, and present an MIH implementation recommendation to command staff by Q4.	Innovation and Advanced Programs
T1	Analyze EMS incident data to identify target populations and service gaps by Q2.	
T2	Identify potential healthcare and community partners for MIH program collaboration by Q2.	
T3	Develop MIH operational framework, performance measures, and referral pathways by Q3.	
T4	Evaluate financial, staffing, and regulatory requirements for program implementation by Q3.	
T5	Present MIH feasibility study and implementation recommendations by Q4.	
P4.28.G3	Evaluate the demand, financial viability, staffing requirements, and operational feasibility of a minimum of two advanced EMS service models, and present a prioritized implementation strategy with go/no-go recommendations to executive leadership by Q4.	Innovation and Advanced Programs
T1	Evaluate demand and operational feasibility for specialty care transport services by Q2.	
T2	Analyze reimbursement opportunities and financial impacts of advanced EMS programs by Q3.	
T3	Identify staffing, training, credentialing, and equipment requirements for advanced EMS services by Q3.	
T4	Develop operational frameworks and response criteria for potential advanced EMS programs by Q4.	
T5	Present implementation recommendations and prioritization strategy to executive leadership by Q4.	

Goals, Objectives, Critical Tasks and Timelines — FY29

P1: Operational Readiness and Deployment

Goal	Statement / Success Metric	Domain
P1.29.G1	Complete a fleet readiness and maintenance assessment that analyzes program effectiveness, calculates annual maintenance costs by apparatus, measures downtime against manufacturer PM schedules, identifies highest-burden units, and establishes KPIs for apparatus availability by Q4.	Equipment, Logistics, and Readiness
T1	Analyze maintenance program effectiveness and collect data to determine apparatus downtime.	
T2	Compare PM schedule to that recommended by manufacturers.	
T3	Calculate annual maintenance cost for all apparatus and vehicles.	
T4	Identify which apparatus have the highest maintenance burden.	
T5	Create key performance indicators for apparatus availability rates.	
P1.29.G2	Execute signed updates to all mutual aid agreements, deliver a minimum of one joint interagency training exercise, and verify communications interoperability with all primary mutual aid partners by Q4. ⚠ Depends on: P1.28.G3	Interagency Collaboration
T1	Hold regular interagency coordination meetings.	
T2	Formalize and execute updated mutual aid agreements.	
T3	Deliver at least one joint interagency training exercise.	
T4	Document outcomes and establish an annual review cycle.	

P2: Workforce Development and Succession

Goal	Statement / Success Metric	Domain
P2.29.G1	Achieve and document 90% or greater professional credentialing of all applicable positions aligned to CFAI credentialing categories, with individual completion plans in place for all remaining uncredentialed personnel by Q4.	Succession and Development
T1	Meet with all staff that have an associated CFAI credential category.	
T2	Integrate in the department succession plan document.	
T3	Develop an individual plan for completion for all staff as applicable.	
T4	Incorporate into the NPFR Officer Development Program.	
P2.29.G2	Develop and present a workforce growth plan that identifies staffing needs through FY32 based on call volume trends and community growth data, includes a phased onboarding model with hiring timeline, employment terms, career progression, and retention strategies, by Q4. ⚠ Depends on: P2.28.G1	Succession and Development
T1	Analyze population demographics, call volume trends, and growth projections.	
T2	Identify emerging staffing needs across all divisions through FY32.	
T3	Develop a phased onboarding plan including hiring, employment terms, career progression, and retention strategies.	
T4	Present workforce growth plan to command staff with supporting data.	

Goal	Statement / Success Metric	Domain
P2.29.G3	Develop a financial plan addressing projected staffing growth needs through FY32, incorporating position cost modeling, identified funding sources, and a phased hiring timeline aligned to call volume thresholds, and present for command staff adoption by Q4. ⚠ Depends on: P2.28.G1	Succession and Development
	T1 Consider grants and identify available funding sources.	
	T2 Calculate base salaries for projected future positions.	
	T3 Develop phased budget request aligned to hiring timeline.	
P2.29.G4	Achieve recognized training center status, host a minimum of two training sessions, increase collaborative training events with external agencies by 50% over the FY28 baseline, and increase external trainee participation in NPFR-led courses by 30% by Q4. ⚠ Depends on: P2.28.G3	Training Operations
	T1 Ensure accreditation requirements are met and submit necessary applications.	
	T2 Host a minimum of two accredited training sessions within the fiscal year.	
	T3 Establish joint training agreements targeting a 50% increase in collaborative events.	
	T4 Develop promotional materials and an online portal to increase external trainee participation by 30%.	
	T5 Host one regional training symposium.	

P3: Community Risk Reduction and Public Education

Goal	Statement / Success Metric	Domain
P3.29.G1	Expand the three highest-performing CRR programs identified through FY28 data analysis by increasing reach, delivery frequency, or target population coverage, with documented expansion outcomes reported by Q2. ⚠ Depends on: P3.28.G1	Program Development and Delivery
	T1 Identify the three programs with strongest performance data.	
	T2 Expand upon proven strengths in reach, impact, and delivery.	
P3.29.G2	Implement targeted improvement plans for the three lowest-performing CRR programs identified through FY28 data analysis, with all improvement actions executed and outcomes assessed by Q3. ⚠ Depends on: P3.28.G1	Program Development and Delivery
	T1 Identify three programs with weakest performance data.	
	T2 Discuss and list specific ways to improve each program.	
	T3 Implement improvement plans for all three programs by Q3.	
P3.29.G3	Identify and address a minimum of two gaps in community outreach coverage targeting underserved geographic areas or demographic groups not currently reached by active CRR programs, with adapted or new program delivery operational in both identified gap areas by Q4.	Community Engagement
	T1 Identify two underserved geographic areas or demographic groups with no active program coverage.	
	T2 Prioritize outreach gaps based on risk profile and feasibility of delivery.	
	T3 Develop or adapt program delivery models appropriate for each gap population.	
	T4 Launch adapted or new delivery in both identified gap areas by Q4.	

P4: Professional Standards and Service Excellence

Goal	Statement / Success Metric	Domain
P4.29.G1	Establish a Historical and Archive Committee with a formal mandate, recruited membership, and completed initial inventory of historical items by Q2, and implement agency performance standards with a documented compliance tracking and evaluation process by Q4. ⚠ Depends on: P4.27.G1	Accreditation and Compliance
	T1: Develop committee mandate, scope, mission, goals.	
	T2: Establish structure and roles.	
	T3: Identify potential members and recruit.	
	T4: Develop appropriate policies and procedures.	
	T5: Inventory and evaluate existing items.	
	T6: Implement agency performance standards and develop a compliance tracking process.	
P4.29.G2	Implement the Mobile Integrated Healthcare program by establishing formal healthcare partnerships, completing all policy and documentation frameworks, launching a pilot serving identified high-utilizer or at-risk populations by Q4, and initiating quarterly outcomes tracking. ⚠ Depends on: P4.28.G2	Innovation and Advanced Programs
	T1: Establish formal partnerships with healthcare providers and community organizations by Q2.	
	T2: Develop MIH policies, procedures, and documentation standards by Q3.	
	T3: Implement MIH pilot program serving identified high-utilizer or at-risk populations by Q4.	
	T4: Track patient outcomes, EMS utilization impacts, and program effectiveness quarterly.	
P4.29.G3	Implement a minimum of one advanced EMS service model based on FY28 feasibility findings with a documented operational framework, trained personnel, and structured outcomes tracking, and deliver a first-year performance report to command staff by Q4. ⚠ Depends on: P4.28.G3	Innovation and Advanced Programs
	T1: Establish Specialty Care Transport framework.	
	T2: Train specialty transport personnel.	
	T3: Implement at least one advanced EMS program or pilot initiative by Q4.	
	T4: Measure operational, clinical, and financial outcomes and report findings annually.	

Glossary of Terms

Term / Acronym	Definition
CFAI	Commission on Fire Accreditation International. The body that administers the international fire and emergency services accreditation program through the Center for Public Safety Excellence.
CRA/SOC	Community Risk Assessment / Standards of Cover. The CFAI-required document identifies community hazards and risks, evaluates department performance, and establishes performance objectives and deployment standards.
CPSE	Center for Public Safety Excellence. The nonprofit organization that administers the CFAI accreditation and CPC credentialing programs.
Gate Goal	A goal designated as a prerequisite for one or more dependent goals. Gate goals must reach Complete status before downstream goals can begin. Denoted by a star symbol (★) in this document.
Goal ID	The structured identifier assigned to each strategic goal in the format P#.YY.G#, where P# is the pillar number, YY is the two-digit fiscal year target, and G# is the goal sequence within that pillar and year.
NPFR	North Port Fire Rescue. The career, all-hazards emergency services agency serving the City of North Port, Florida.
SMART Objective	An objective is Specific, Measurable, Achievable, Relevant, and Time-bound. The goals and tasks in this plan meet SMART criteria.
SAM	Self-Assessment Manual. The CFAI-required document in which the agency evaluates its performance against all accreditation categories and performance indicators.
SOC	Standards of Cover. The component of the CRA/SOC that establishes the department's performance objectives, deployment standards, and benchmarks.