

Council Member Charles Allen, Council Members, Members of the City Government, Friends and Family, Members of the District of Columbia Office of Unified Communication, and the 911 Community as a whole. I am Walt Kaplan, a 35-year veteran of the public safety/first responder community. I am here today to provide insight and support for the members of the 911 community and residents/visitors to Washington DC.

A wise man and friend once said that (and I'm paraphrasing) "911 is a social contract between local government and the community it serves". When someone in the community dials 911, they need help. It doesn't matter the reason why something isn't working, all that matters is that we get help to them as quickly as possible. So, how does a 911 center really operate? Dedicated personnel working in an environment where most of the networks and equipment are provided on a fee-for-service basis, a great example of what I am talking about is your personal cell phone. You buy the phone, but the network is owned by one of the cell phone providers as is the operating system on the phone. This holds true for 911 centers, where we purchase the equipment but the services, call delivery, and networks are often owned by various vendors. The telephone carriers are where the first point of contact anyone will ask for help by dialing "911". The carriers own the system for dialing and location accuracy. As a call is delivered, the phone location is delivered by pinging the closest tower. This gives an estimate of the caller's location. Caller location and accuracy improving, but the carriers are the ones that control the location accuracy. Location accuracy however, is only one piece of this complex puzzle and relies on other parts of the equation to get the help requested by the caller. The telephone call is then delivered to a call handling solution that will route the 911 call through the carrier network to a call handling solution where the 911 call taker answers the phone. Again, the vendor owns the network. If the network is down, the telephone carriers will on occasion notify the 911 centers of an issue.

Ms. Holmes previously worked diligently with the carriers on the Council of Government carrier outage notification process for all of the regional 911 centers, bringing the carriers to the table and holding them accountable, but it is still dependent on the carriers to consistently provide notifications. The call taker will then ask additional questions to obtain pertinent information on the location and nature of the incident and document the information into the computer-aided dispatch (CAD) system.

CAD is a third-party application that is used as the main data communication tool for all 911 centers. All 911 centers do not have the same CAD system, but 911 centers use third-party applications to communicate information between the various CAD systems. If life-saving measures are needed, the call taker will immediately send the information to dispatch for a response or quick dispatch. The call taker will continue to ask additional questions by using a commercial product to help the call taker get the appropriate response. All of the information is documented in CAD and sent to the police, fire, or ems dispatcher or all three may receive the same call.

Some of the calls for service may be diverted to other agencies as low priority or specific calls that may need additional specific services. Mental health, accidents no injuries, and low acuity ems calls are a few that are diverted for secondary screening. All the time, the clock is ticking, and lives are potentially at risk if there are any delays. The dispatcher (police, fire, or ems) is alerted to the call via CAD of the request.

Police, fire, or ems dispatchers send the assistance by either voicing the call or is sent digitally by CAD. It sounds easy but with one incident may require three or more different types of responses. Again, the clock is ticking. The dispatcher uses a radio and mobile data terminals to relay the information to the

first responders. 911 is changing fast and is seeing the largest growth of any time since 911 was first dialed on February 16, 1968. The past 5 years have seen tremendous advances in technology, requiring 911 centers to continually adapt and learn new technologies that serve to improve service to the community.

911 centers require innovative and collaborative leaders, someone that understands the ins and outs of technology, people, and systems and who has experience in serving both the community at large and the various public safety entities they serve. For many years, Washington DC was known as the “donut hole” because of poor leadership and a lack of participation in the region. With the number of commuters and visitors to the area, this collaboration and coordination between PSAPS in the region is critical to providing everyone the same level of service. This was something that Ms. Holmes rectified almost immediately when she first started.

The National Capital Region and District of Columbia require thoughtful, collaborative leaders to better serve all of its constituents. We are lucky to have Karima Holmes for a second time. Ms. Holmes embodies everything that a leader in this field should have, ethics, integrity and the ability/willingness to collaborate.