



CITY OF CHICAGO
OFFICE OF INSPECTOR GENERAL

20
25

Second Follow-up to OIG's Second Audit of the Chicago Fire Department's Fire and Emergency Medical Response Times

October 29, 2025

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I | Introduction

The City of Chicago Office of Inspector General (OIG) has completed a second follow-up to its October 2021 audit of the Chicago Fire Department's (CFD) fire and emergency medical response times. Based on CFD's responses, OIG concludes that CFD has not implemented corrective actions related to the audit findings.

The purpose of the 2021 audit, OIG's second on the topic following a first audit in 2013, was to determine whether CFD had goals for fire and emergency medical services (EMS) response times consistent with state and national standards and whether CFD response times in fact met those standards.¹ OIG found that CFD had not implemented performance management strategies that would allow it to evaluate fire and EMS response times in alignment with best practices, nor had the Department remedied data issues first identified by OIG in 2013.

Based on the results of the 2021 audit, OIG recommended that CFD,

- acknowledge the importance of department-wide quantitative performance measures and begin public annual reporting on its response time performance;
- establish and document department-wide turnout, travel, and total response time² goals at the 90th percentile for both fire and EMS; or, if they believed National Fire Prevention Association (NFPA) recommended turnout and travel times were unachievable in Chicago, conduct a systematic evaluation of local factors affecting response times and set reasonable goals for turnout, travel, and total response times accordingly;³
- identify, monitor, and remedy the cause of gaps in its data;
- consider hiring an internal data specialist to improve data quality; and
- ensure that any external partners it engages to analyze departmental data conduct a full assessment of that data's completeness and reliability.

In its response to the audit, CFD “acknowledge[d] the importance of department-wide quantitative performance measures” and described corrective actions it would take.

¹ OIG published the first audit of CFD's fire and emergency medical response times in October 2013. City of Chicago Office of Inspector General, “Chicago Fire Department Fire and Medical Incident Response Times Audit,” October 18, 2013, <https://igchicago.org/wp-content/uploads/2013/10/CFD-Response-Time-Audit-Report.pdf>.

² There are generally three phases of an emergency response: 911 call processing, turnout, and travel. First, 911 receives an emergency call, and the Office of Emergency Management and Communications (OEMC) dispatches first responders using a Computer Aided Dispatch (CAD) system. Second, CFD first responders press a button in the firehouse to acknowledge the call, marking the beginning of the “turnout time” phase (as well as the CFD total response time). Third, the first responders press another button inside their vehicle to show they are en route to the scene, beginning the “travel time” phase. When they arrive, they press the same button a second time, marking the end of the CFD total response time. The CAD system records timestamps for each of these milestones.

³ NFPA publishes a set of management and operations best practices for fire departments. NFPA Standard 1710 is widely accepted as a national benchmark for fire and emergency response times. During the 2021 audit, CFD told OIG that the Department “has a goal . . . to meet or exceed [the fire response time] requirements” of NFPA Standard 1710. The 2020 edition of Standard 1710 lists a fire response turnout goal of 80 seconds or less and travel goal of 240 seconds or less, and an emergency medical response turnout goal of 60 seconds or less and travel goal of 240 seconds or less. National Fire Protection Association, “NFPA Standard 1710: Standard for the Organization and Deployment of Fire Suppression Operations, Emergency Medical Operations, and Special Operations to the Public by Career Fire Departments,” 9, Quincy, Massachusetts: National Fire Protection Association, 2020.

In August 2025, OIG inquired about corrective actions taken by CFD in response to the 2021 audit and a 2023 initial follow-up report. Based on CFD's response to the second follow-up inquiry, OIG concludes that CFD has not implemented corrective actions. Notably, CFD has neither hired staff to assist with data analytics nor found another method to analyze data gaps. Nor has CFD established and documented response time goals. Further, CFD has not worked with the Office of Emergency Management and Communications (OEMC) to assess the root causes of data gaps. Finally, CFD has not employed any after-action reporting and improvement planning mechanism to improve data quality. CFD attributed its lack of progress to the Office of Budget and Management's (OBM) denying budget requests for personnel and resources to conduct data analysis.

OIG urges CFD to fully implement the audit's corrective actions. Below, OIG summarizes its three audit findings and associated recommendations, as well as CFD's response to the follow-up inquiry.

OIG thanks the staff and leadership of CFD for their cooperation during the audit and their responsiveness to the follow-up inquiries.

II | Follow-Up Results

In August 2025, OIG followed up on its October 2021 second audit of CFD's fire and EMS response times and the initial 2023 follow-up report.⁴ CFD responded by describing the status of corrective actions. Below, OIG summarizes the three original findings, the associated recommendations, and the status of CFD's corrective actions in response to those recommendations.

| Finding 1: CFD has not implemented performance management practices that would allow it to evaluate its fire and EMS response times.

OIG Recommendation 1 |

OIG recommended that CFD management acknowledge the importance of department-wide quantitative performance measures and begin public, annual reporting on response time performance. The reports should include the component pieces of turnout and travel time and should use percentile measurements.⁵ Further, consistent with NFPA 1710, the reports should provide geographic analysis that identifies areas of the city where CFD is not meeting its response time goals.⁶

State of Corrective Action 1 | Not Implemented

In response to the 2021 audit, CFD acknowledged the importance of department-wide quantitative performance measures. The department stated it did not have personnel available to analyze the data or produce a public report, but that it had been taking steps to hire additional staff. CFD also planned to expand the role of its analysis partner, Urban Labs at the University of Chicago, to help improve response time performance.

In response to OIG's first follow-up in 2023, CFD reported that, although it had developed a work order for Urban Labs to conduct the recommended analysis, it had not executed an agreement with Urban Labs to do so. CFD further stated OBM has denied budget requests for personnel and other resources necessary to conduct the data analysis. In August 2025, in response to OIG's second follow-up inquiry, CFD stated that it has continued to ask for additional resources to perform the data analysis, but OBM has denied its requests. Additionally, CFD stated that it has continued its efforts to obtain analytical resources from the University of Chicago. Specifically, CFD prepared a

⁴ City of Chicago Office of Inspector General, "Second OIG Audit of the Chicago Fire Department's Fire and Emergency Medical Response Times," October 12, 2021, [Second-OIG-Audit-of-the-Chicago-Fire-Departments-Fire-and-Emergency-Medical-Response-Times.pdf](#). In 2023, OIG conducted an initial follow-up to that audit. City of Chicago Office of Inspector General, "Follow-up to OIG's Second Audit of the Chicago Fire Department's Fire and Emergency Medical Response Times," September 28, 2023, <https://igchicago.org/wp-content/uploads/2023/09/OIG-Follow-up-to-2nd-Audit-of-CFDs-Fire-and-EMS-Response-Times.pdf>.

⁵ NFPA defines turnout time as "the time interval that begins [...] by either an audible alarm or visual annunciation or both and ends at the beginning point of travel time," and travel time as "the time interval that begins when a unit is en route to the emergency incident and ends when the unit arrives at the scene." National Fire Prevention Association, "NFPA Standard 1710: Standard for the Organization and Deployment of Fire Suppression Operations, Emergency Medical Operations, and Special Operations to the Public by Career Fire Departments," 9, Quincy, Massachusetts: National Fire Protection Association, 2020.

⁶ NFPA 1710 is the standard defining fire and EMS response time goals. NFPA 1710 allows for departments to modify the prescribed goals in response to a community-wide risk assessment.

task order for the University of Chicago to embed analysts in CFD who would assist in building operational dashboards. While CFD stated it planned to issue the order in December 2024, the City's Department of Technology and Innovation (DTI) determined that the order included terms that were not permitted under the controlling Master Data Sharing agreement between the City and the University.

CFD stated that the Mayor's Office "assist[ed] in navigating a solution." The University of Chicago agreed to provide an employee who would volunteer to analyze CPD's data. However, CFD reported that, as of the time of their response, the university had not provided the volunteer. CFD stated that without the volunteer or the ability to hire its own analysts, the department remains unable to complete the necessary analysis or to publicly report on it.

| Finding 2: CFD has not documented response time performance goals outside of its state-required EMS plan.

OIG Recommendation 2 |

OIG recommended that CFD management establish and document department-wide turnout, travel, and total response time goals for both fire and EMS at the 90th percentile—that is, that 90% of responses should meet the time goal. OIG also recommended that, if department management believed NFPA-recommended turnout and travel times are unachievable in Chicago, CFD conduct a systematic evaluation of factors affecting response times and set reasonable goals for turnout, travel, and total response times accordingly.

As noted in the 2021 audit, the Illinois Department of Public Health (IDPH) and the EMS Systems Act set *minimum* standards for Illinois hospitals and EMS providers, and includes "a commitment to optimum [EMS] response times up to six minutes in primary coverage areas."⁷ NFPA Standard 1710, widely accepted as a national benchmark for fire and emergency response times and with which CFD has reported a goal of complying, recommends a total fire response time goal for turnout and travel combined is 5 minutes and 20 seconds, and the total EMS response time goal is 5 minutes.

State of Corrective Action 2 | Not Implemented

In response to the 2025 follow-up inquiry, CFD stated that due to the lack of budgetary support from OBM, it has yet to establish any goals related to response times. This is consistent with CFD's response to OIG's 2023 follow-up inquiry, wherein CFD likewise attributed its inability to measure and analyze response times to a lack of budgetary support from OBM.

⁷ CFD is required to meet strict reporting requirements and submit written plans to the Illinois Department of Public Health (IDPH) which include "a commitment to optimum [EMS] response times up to six minutes in primary coverage areas." Illinois Administrative Code title 77, § 515.810 (2018). CFD's internal Medical Administration and Regulatory Compliance division monitors CFD's compliance with the Act. IDPH is authorized to take regulatory action if CFD does not meet those requirements, such as imposing fines or creating a corrective action plan.

| Finding 3: CFD's data is not adequate to reliably measure key components of response time.

OIG Recommendation 3 |

OIG recommended that CFD work with OEMC to assess the root causes of data gaps and address these issues moving forward so that these gaps are not recreated in the City's planned-for new computer-aided dispatch (CAD) system.⁸ Specifically, OIG recommended that CFD pursue system capabilities that would facilitate the analysis of turnout and travel time, thereby enabling a better understanding of potential issues in its response process. In addition, OIG recommended that CFD,

- consider collaborating with OEMC and the City's Office of Public Safety Administration (OPSA) to leverage existing global positioning system (GPS) technology in CFD vehicles to address blank and inaccurate time fields, while waiting for the new CAD system to become operational;⁹ and
- work with OEMC to continuously monitor the number of blank and inaccurate time fields in its existing and new CAD systems, and work toward achieving completeness and accuracy in all data fields.

State of Corrective Action 3 | Not Implemented

In response to the 2025 follow-up inquiry, CFD said that OEMC still has not fully implemented the new CAD system. CFD stated it could not provide a reliable estimate of when the new CAD system might be implemented. In response to OIG's initial 2023 follow-up inquiry, CFD had identified late 2024 to early 2025 as the target for implementing the new CAD system. In response to the original 2021 audit, CFD had provided a target of November of 2022.

OIG Recommendation 4 |

OIG recommended that CFD,

- ensure that its data analysis partners¹⁰ conduct a full assessment of its data completeness and reliability, including an assessment of any trends in missing data;¹¹
- use the results of this assessment to address any operational errors that led to missing data, thereby enabling comprehensive response times analyses; and
- consider working with OBM to create and fund a position for an internal data analyst, who could combine its operational expertise with technical skills to improve data quality.

⁸ As explored in OIG's 2021 audit, CFD and OEMC use this system to dispatch and track emergency response vehicles. The current CAD system was implemented in 1995. In January 2020, OEMC announced that the City entered into an agreement to replace the current CAD system with the new system scheduled to go live in November 2022. As of this follow-up report, the new CAD system is not yet live.

⁹ The City established OPSA beginning in 2020 to seek efficiencies and savings by centralizing the administrative functions of its public safety departments, including CFD, OEMC, and CPD.

¹⁰ During the 2021 audit, the Department had expected to sign a contract with the University of Chicago Urban Labs to conduct a series of analytical tasks.

¹¹ OIG consulted with a statistics expert from the Government Accountability Office about whether a percentile analysis is possible with the amount of CFD's missing data. They stated that department management should assess whether there is a pattern to the missing data. If there is a pattern (for example, if all events missing timestamps occurred at night or came from the same firehouse), management should remedy the problem. If management do not know if there is a pattern, they cannot analyze the whole population reliably.

State of Corrective Action 4 | Not Implemented

In response to the 2025 follow-up inquiry, CFD stated that it remains unable to analyze response time data because it has not been provided a volunteer analyst from University of Chicago and OBM has denied its requests for additional resources for analysis. This matches CFD's response to the 2023 follow-up inquiry and shows no further progress on this corrective action since the 2021 audit.

III | Conclusion

OIG urges CFD to fully implement OIG's long-standing recommendations to monitor and analyze emergency and medical response times. Despite having first received similar recommendations in 2013, CFD has not yet implemented critical performance measures. This undermines CFD's accountability to Chicagoans and misses important opportunities to evaluate whether the department is meeting its core mission of promoting fire safety, providing emergency care, and extinguishing fires. Without response time data, residents cannot be assured that CFD is delivering emergency services in a timely, equitable, and effective manner, particularly in communities that may already face disparities in public safety outcomes. OIG notes that CFD has consistently reported unmet budget needs as obstacles; without resources to address these gaps, CFD leaves Chicagoans without a meaningful measure of its performance and City leadership without the information necessary to make informed resource and policy decisions.



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