

Dockets #0524-0531 FY21 Budget Boston Emergency Medical Services Working Session: Friday, May 14 2021, 10:00 a.m. Hearing: Thursday, May 27, 2021, 2:00 p.m.

The following is a collection of questions that were asked by the Committee regarding the FY22 budget for Boston Emergency Medical Services at the Working Session on Friday, May 14, 2021 at 10:00 a.m.

Recording here: https://www.youtube.com/watch?v=CNkRo2Yo8kc

The Administration is requested to respond to all questions in one of three ways:

- 1. Verbally at the hearing on Thursday, May 27th, at 2PM.
- 2. For factual questions, through written responses supplied prior to May 27th, including budget book page numbers or other references where appropriate.
- 3. By deferring to a specific scheduled departmental budget hearing.

Please annotate and return this information request before May 27th, indicating how each question will be answered.

BEMS Budget Questions

Councilor Kenzie Bok, Chair asked:

• Please explain any impact the decrease in your budget will have.

Our negotiated fringe benefit rate agreement with HHS calculates fringe benefits differently from previous agreements. In FY21, fringe benefits were calculated as 53% of all personnel spending (salaries of all FT and PT employees, differentials, and overtime). In FY22, our agreement with HHS calculates fringe benefits as 57.7% for all full and part-time benefit eligible employees and 8% for all benefit ineligible employees, differentials, bonuses, and overtime. Therefore, bureaus that are differential and overtime heavy (such as EMS) or have relatively more benefit ineligible employees (such as Homeless Services Bureau for fill-in counselors and client workers) will see a decrease in their calculated fringe, while other bureaus will pick up an increase. This is just an internal redistribution that more closely aligns fringe benefit costs to the employees who actually receive fringe benefits. No impact to operations is anticipated.

• What will your involvement be in shaping the Alternative 911 response?

Boston EMS participates in a mental health response workgroup, led by the Mayor's office, looking at alternative 9-1-1 response models for patients with mental illness. The



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workgroup includes representatives from BPD, Boston EMS, and the Boston Emergency Services Team (BEST). The group is working on how to best incorporate available resources across departments.

• How often does EMS answer calls without police accompaniment?

Approximately 39% of all Boston EMS calls have a police incident number, from motor vehicle accidents to shootings and stabbings. In the case of behavioral health emergencies, with an emotionally disturbed person (EDP) type code, there are two categories:

- **EDP-3:** the patient is showing unusual behavior with a psychiatric history, the police department has requested a psychiatric evaluation, or the patient is expressing suicidal ideation but is non-violent or uninjured.
- EDP-2: If the patient is reported to be violent, threatening others, has access to weapons, or is conscious after attempting suicide, the incident is categorized as an EDP-2. EDP-2 calls require a joint response by the Boston Police Department and Boston EMS. Our standard procedure is to dispatch a unit but to hold short of the scene or entering the building until the BPD report that the scene is secure.

Boston EMS saw a 9% increase in EDP-2 incidents in 2020, compared to 2019, and a 17% decline in EDP-3 incidents. Of the 10,238 incidents Boston EMS responded to in 2020 with a final type code of EDP, a total of 6,870 resulted in transport. There were 3,367 EDP incidents that originated with the type-code 'REQE' (Request EMS), meaning another department, such as the Police, requested us, and another 869 that were initially entered as 'REQEP' (Request EMS & Police, where both our departments were requested) in 2020.

What is your current training for mental health response?

All personnel have annual training on responding to behavioral health emergencies and interacting with emotionally disturbed persons. The recruit academy for all new hires includes behavioral health and scene de-escalation training, as well as presentations from the BEST team.



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Boston EMS is working to roll out a mental health training program this summer for our personnel, in coordination with our Peer Support program, training division, and the International Trauma Center. It includes a focus on recognizing differential mental health challenges in the field, how to approach and stabilize patients under distress, how to identify violent behavior in patients with mental illness, and psychological first aid.

• What is your progress towards increasing diversity at EMS?

Twenty-eight percent (28%) of Boston EMS uniformed members identify as Asian, Black or African American, Hispanic or Latinx, Native Hawaiian/Other Pacific Islander, or Two+ Races. Boston EMS is not only committed to diversifying the department as a whole, but also promotional ranks, which leads to increased retention and a more inclusive culture. The current recruit class of new EMT hires is 62% persons of color. Training Captains, who shape the educational curriculum for personnel are 40% persons of color, and the most senior uniformed ranks of the department (Deputy Superintendent and above) are 38% persons of color (6 out of 16).

In 2020, Boston EMS assigned a Deputy Superintendent to oversee department Diversity and Engagement efforts, while promoting a commitment to equity and inclusion amongst all department leaders.

In the Spring of 2020, members of Boston EMS established the United Coalition of EMS Providers (UCEP), a non-profit organization comprised of over 60 members of Boston EMS (and growing) who support the mission of advancing equity and inclusion within the City's pre-hospital public safety service. With the Paramedic rank having the lowest diversity within the department (6% persons of color), 16 department EMTs were selected for paramedic professional development training, with costs covered through grants, including SkillWorks and Neighborhood Jobs Trust, secured in partnership with the Office of Workforce Development. Training is provided by Bunker Hill Community College, with candidates currently taking pre-requisite courses. At the completion of this program in 2022, we estimate that department EMTs holding a paramedic certification (and therefore, eligible for promotion) will increase to 32 percent persons of color (from 16%) and 40 percent women (from 28%).

Boston EMS continues to partner with the Office of Workforce Development through their City Academy program, offering full scholarships for residents to become trained as EMTs and complete the state certification process. And, for the third year, Boston EMS



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prioritizes residents who pay themselves for the department EMT course. This has helped expand the diversity of residents eligible for employment with Boston EMS.

Councilor Ed Flynn asked:

• What is the status and timeline for a new EMS station in the South Boston Waterfront?

Boston EMS has been in conversations with BPDA and PFD, who are actively working to identify an appropriate site for an EMS station in the Seaport.

Councilor Matt O'Malley asked:

• The City is in need of a centralized EMS garage bay. Are there plans to examine the possibility of a garage bay located at Franklin Park near Shattuck Hospital?

We are working with PFD, BPDA and OBM to address station needs, including Franklin Park. Funding has been set aside for looking at other garage opportunities, which would be inclusive of the Franklin Park area.

Councilor Liz Breadon asked:

• What are the plans for a new EMS facility in Allston-Brighton?

At one point an EMS station was included as part of the St Elizabeth's Hospital parking garage plans. We are not aware of the status of construction or current plans, but it is our understanding the EMS station is no longer included.

• What is the status for an advanced life support ambulance in Allston-Brighton?

Boston EMS is a two-tiered ambulance service, with most (21) operating as Basic Life Support (BLS), EMT staffed, units. There are currently two BLS units that are posted in



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Allston/Brighton, with personnel trained in clinical skills necessary to initiate life-saving care. An additional 5 ambulances operate as Advanced Life Support units across the City, staffed by two paramedics. Each of these ALS units provide primary coverage across multiple neighborhoods. For critical medical emergencies, Boston EMS deploys both ALS and BLS units, to ensure prompt coordinated care, allowing paramedics to continue treating the patient while the EMTs drive the ambulances to the hospital. Paramedic 16 is garaged at 330 Brookline Ave, at the Beth Israel Deaconess Medical Center, serving as the primary ALS unit for Allston/Brighton and surrounding neighborhoods.

• Can you provide a breakdown of the type of calls EMS has received particularly calls involving substance abuse?

In calendar year 2020, Boston EMS responded to 104 calls to Allston/Brighton that, after review of EMS crew documentation, were determined to be narcotic related illness (NRI). Of those incidents, 41 involved administration of Narcan. In total, Boston EMS responded to 3,951 NRI incidents in 2020 across the City.

The chart below shows citywide types of calls for Boston EMS in 2020, based on initial information provided to the 9-1-1 call taker.

INCIDENTS BY TYPE	NUMBER	PCT.
Illness (abdominal pain, fever,	36,846	
dizzy)		31.89%
Investigations (person down,	23,956	
alarm)		20.73%
Injury (lacerations, fractures, etc.)	11,996	10.38%
Cardiac Related (unconscious, CPR,	10,410	
etc.)		9.01%
Respiratory (Asthma, CHF, etc.)	8,223	7.12%
Psychological/Suicidal	10,079	8.72%
Motor Vehicle (MVA, pedestrian)	4,359	3.77%
Neurological (CVA, seizures)	4,080	3.53%
Fire/ Hazmat/ Standby/	2,394	
Environ.		2.07%
Trauma (penetrating injury, long fall, etc.)	1,185	1.03%
Overdose	2,009	1.74%
Total	115,537	100%



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Councilor Ricardo Arroyo asked:

• Why is Boston EMS's FY22 budget set to decrease by 2.5% from FY21? What does this decrease represent?

Our negotiated fringe benefit rate agreement with HHS calculates fringe benefits differently from previous agreements. In FY21, fringe benefits were calculated as 53% of all personnel spending (salaries of all FT and PT employees, differentials, and overtime). In FY22, our agreement with HHS calculates fringe benefits as 57.7% for all full and part-time benefit eligible employees and 8% for all benefit ineligible employees, differentials, bonuses, and overtime. Therefore, bureaus that are differential and overtime heavy (such as EMS) or have relatively more benefit ineligible employees (such as Homeless Services Bureau for fill-in counselors and client workers) will see a decrease in their calculated fringe, while other bureaus will pick up an increase. This is just an internal redistribution that more closely aligns fringe benefit costs to the employees who actually receive fringe benefits. No impact to operations is anticipated.

• How is EMS working to ensure that its employees are representative of the diversity of the City of Boston? And what efforts were made over the past year given that the breakdown looks almost identical to the information provided last year?

The total number of members who identify as Asian, Black or African American, Hispanic or Latinx, Native Hawaiian/Other Pacific Islander, or Two+ Races, increased from 107 (26%) in April of 2020 to 115 (27%) in April of 2021 and the total number of women at the department increased from 132 (32%) to 134 (34%), during that same timeframe. While these numbers may seem moderate, it represents a 7% increase in Asian members, 8% increase in Black/African American members, and 12% increase in Hispanic members. We will continue to make this a priority, with a focus on expanding the diversity of residents who meet the hiring pre-requisite of a Massachusetts EMT certification.

Please see the previous response to Councilor Bok for additional details.

• What percentage of BEMS staff is fully vaccinated? How is BEMS working to ensure that its staff is fully vaccinated?



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Currently, 80% of Boston EMS members are vaccinated. In December of 2020, when the vaccine first became available, Boston Medical Center graciously extended the classification of healthcare providers to our department members. This allowed a significant percentage of our workforce to become fully vaccinated by January of this year. Appointments were easy to schedule through BMC and they permitted walk-ins, making it the principal location for personnel vaccinations. As opportunities to get vaccinated at other locations arose, the department shared that information with personnel. And, the Boston EMS' designated infection control team, comprised of physicians and nurses, have been on hand throughout the pandemic to confidentially answer any questions and concerns pertaining to COVID-19 and the vaccine. A total of 56 members have had COVID-19 to date, with just one person testing positive from March of this year to present.

Boston EMS has also played a role in vaccinating others. In partnership with the Boston Housing Authority, Boston EMS has coordinated numerous vaccination clinics at public housing facilities, vaccinating hundreds of Boston residents.