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>>> I'M THE CHAIRMAN OF WAYS AND MEANS AND THE DISTRICT 9 CITY COUNCILOR. TODAY IS THURSDAY, MAY 23rd, AND WE ARE HERE WITH OUR GOOD FRIENDS FROM EMERGENCY MEDICAL -- EMS -- SERVICES. HAPPY EMS WEEK, FIRST. I'D LIKE TO REMIND FOLKS THIS IS A PUBLIC HEARING BEING BROADCAST AND RECORDED ON COMCAST CHANNEL 8, RCN82, VERIZON 1964, AND STREAMED AT BOSTON.GOV/CITY-CITY COUNCIL.TV. THERE WILL BE PUBLIC TESTIMONY TAKEN AT VARIOUS STAGES THROUGHOUT THE HEARING. THERE IS A SIGN-IN SHEET TO MY LEFT BY THE DOOR. I ASK THAT YOU SIGN IN, STATE YOUR NAME, AFFILIATION, **RESIDENCE. AND CHECK THE BOX YES** IF YOU WISH TO TESTIFY. THERE ARE NUMEROUS WAYS TO TESTIFY. YOU CAN ATTEND A PUBLIC HEARING SUCH AS THIS ONE AND SIGN UP, AS I JUST STATED. YOU CAN EMAIL THE COMMITTEE AT CCC.WM@BOSTON.GOV. YOU CAN MAIL THE COMMITTEE. OR YOU CAN COME TO A HEARING DEDICATED TO PUBLIC TESTIMONY ON TUESDAY, JUNE 4th FROM 2:00 P.M. TO 6:00 P.M. AND WE WILL STAY AS LONG AS NECESSARY TO MAKE SURE EVERYONE IS HEARD ON THE BUDGET. AS I SAID EARLIER, WE ARE HERE WITH BOSTON EMS AS IT PERTAINS TO THE FY '20 BUDGET REVIEW OF DOCKETS 0622 THROUGH 0625, **ORDERS FOR THE FY '20 OPERATING** 

BUDGET, INCLUDING ANNUAL APPROPRIATIONS FOR DEPARTMENTAL OPERATIONS, ANNUAL APPROPRIATION FOR THE SCHOOL DEPARTMENT, APPROPRIATION FOR OTHER POST-EMPLOYMENT BENEFITS, AND APPROPRIATION FOR CERTAIN TRANSPORTATION AND PUBLIC REALM **IMPROVEMENTS AS WELL AS DOCKETS** 0626 THROUGH 0628, CAPITAL BUDGET APPROPRIATIONS, INCLUDING LOAN ORDERS AND LEASE PURCHASE AGREEMENTS. I'M JOINED BY MY FRIEND FROM DORCHESTER, CITY COUNCILOR AT-LARGE ANNISSA ESSAIBI-GEORGE. DEAR COUNCILOR CIOMMO, I REGRET I WILL NOT BE IN ATTENDANCE ON TODAY'S HEARING FY '20EMS BUDGET DUE TO A FAMILY COMMITMENT. I WANT TO SAY IT'S BEEN AN HONOR TO WORK WITH BOSTON EMS OVER THE COURSE OF MY TENURE ON THE BOSTON CITY COUNCIL. YOU ARE THE FINEST EMS SERVICE IN THE COUNTRY, AND I AM PROUD TO HAVE WORKED WITH YOU, SIGNED **CITY COUNCILOR DISTRICT 5 TIM** McCARTHY. DEAR CHAIR CIOMMO, I REGRET I'M UNABLE TO ATTEND THE EMS BUDGET TEAR HEARING DUE TO WORK-RELATED TRAVEL. I WANT TO THANK EMS FOR THEIR CRITICAL WORK AND SPECIFICALLY NOTE THAT EAST BOSTON IS THRILLED TO HAVE A SECOND AMBULANCE AVAILABLE TO THE AREA. THANK YOU. PLEASE READ THIS INTO THE RECORD. REGARDS, LYDIA EDWARDS. DEAR MR. CHAIR. DUE TO THE

DEAR MR. CHAIR, DUE TO THE WORK-RELATED TRAVEL, I REGRET THAT I'M UNABLE TO ATTEND TODAY'S HEARING ON THE COMMITTEE ON WAYS AND MEANS ON DOCKETS 0622 THROUGH 0628 THE FY '20 BUDGET FOR BOSTON EMS DEPARTMENT. MY STAFF WILL BE IN ATTENDANCE, AND I LOOK FORWARD TO REVIEWING THE RECORDS OF THIS HEARING. SINCERELY, KIM JANEY, BOSTON CITY COUNCILOR DISTRICT 7. I WILL JUST SAY SIMILAR THAT WE ARE VERY PROUD OF THE WORK THAT YOU AND ALL THE MEN AND WOMEN THAT ARE OUT IN THE FIELD TODAY OR AT HOME RESTING UP FOR THEIR SHIFT. WE HOLD THEM A DEBT OF GRATITUDE FOR THE FINE WORK THEY DO. A GREAT REFLECTION ON ALL OUR PUBLIC SAFETY FIRST RESPONDERS IN THE CITY OF BOSTON AND FOR YOUR LEADERSHIP. JIM. IT'S BEEN EXEMPLARY. IT'S BEEN AN HONOR FOR ME TO WORK WITH YOU AS WELL. THANKS FOR BEING HERE TODAY. IT'S ALL YOURS. >> OKAY.THANK YOU. GOOD MORNING, MR. CHAIR, COUNCILOR ESSAIBI-GEORGE. I'M HAPPY TO BE HERE TODAY. WE'RE HAPPY TO ENTERTAIN **QUESTIONS YOU HAVE RELATED TO** OUR OPERATIONS, OUR BUDGET, OUR PLANS, OUR INITIATIVES, OUR PERFORMANCE. WITH ME TODAY IS OUR CHIEF OF STAFF AT BOSTON EMS. WE ALSO HAVE SOME COMMAND STAFF AND OUR BUDGET OFFICE AS WELL AS PUBLIC HEALTH THAT ARE AVAILABLE SHOULD WE NEED TO REACH OUT, BUT I THINK WE SHOULD BE WELL PREPARED TODAY. JUST FOR OPENING STATEMENT, I REALLY HAVE WHAT IS ON THE SLIDE DECK THERE. I THINK YOU HAVE YOUR HARD **COPIES NOW?** >> YES. >> TECHNICAL ISSUES. I'LL JUST GO THROUGH QUICKLY --AND OH, I MUCH APPRECIATE THE LETTERS FROM THE COUNCILORS WHO COULDN'T BE HERE TODAY. I DON'T REMEMBER HEARING THAT BEFORE WHEN SOMEBODY DIDN'T MAKE IT, SO THAT WAS VERY NICE SENTIMENT. WELL ACCEPTED BY US. COUNCILOR McCARTHY WAS PARTICULARLY GOOD OVER THE YEARS. I DON'T THINK HE EVER MISSED A GRADUATION OR AWARD CEREMONY, ANYTHING LIKE THAT.

HE WASN'T EXAGGERATING HOW MUCH PRIDE HE TOOK IN THE SERVICE. IT WAS WELL FELT. COUNCILOR EDWARDS AND JANEY KIM. VERY GOOD TO WORK WITH TOO. COUNCILOR EDWARDS HAS BEEN HELPING US A LOT WITH CHARLESTOWN AS WELL AS EAST BOSTON ISSUES, SO WE APPRECIATE THAT. JUST ONE MORE THANK YOU. YESTERDAY, I MISSED THE **RESOLUTION THAT YOU OFFERED ON** COMMENDING EMS WEEK. THAT'S BECAUSE WE WERE AT THE EAST BOSTON EVENT AND IT RAN A LITTLE BIT OVER. SOME OBLIGATIONS THERE KEPT ME FROM COMING BACK. >> WE KNOW WHERE YOU STAND. >> THANK YOU VERY MUCH. THAT WAS WELL-RECEIVED AS WELL. I'LL JUST START OFF. AS WE GET TO THE END OF NATIONAL EMS WEEK -- AND YOU ALL MARKED IT YESTERDAY. THANK YOU. CITY HALL WAS LIT UP LAST NIGHT IN ORANGE AND BLUE, AND WE APPRECIATE THAT AS WELL. WE HAVE A COUPLE MORE EVENTS LEFT. PERSONALLY, TOMORROW WE'RE HAVING A BLOOD DRIVE THAT WE'RE RUNNING UP AT OUR HEADQUARTERS WHERE OUR TRAINING DIVISION IS TOMORROW. THAT'LL BE PROBABLY THE LAST OFFICIAL EVENT THAT WE SCHEDULED FOR EMS WEEK. I'LL GIVE OVERVIEW OF WHAT WAS ON SLIDE ONE FOR=5m BOSTON EMS. WE ARE A TWO-TIERED SYSTEM. WE OFFER BASIC LIFE SUPPORT AND ADVANCED LIFE SUPPORTS. IN 2018, OUR VOLUME NUMBERS WERE THAT OUR CALL VOLUME WAS 126.419 CLINICAL INCIDENTS. AND THAT REQUIRED 154,417 AMBULANCE RESPONSES. SOMETIMES YOU HAVE TO SEND MORE THAN ONE UNIT TO A CALL. THAT RESULTED IN 85,697

TRANSPORTS, AND SO, ON A TYPICAL DAY, ON AN AVERAGE DAY, THAT COULD BE 350 CALLS, CLINICAL **INCIDENTS IN A DAY, AND 240** TRANSPORTS. IN A 24-HOUR PERIOD, WE STAY BUSY. WE CURRENTLY HAVE 421 FULL-TIME **BUDGETED POSITIONS AND 395 OF** THOSE ARE UNIFORMED. SOME OF THOSE POSITIONS RIGHT NOW IN TRAINING ACADEMY, A CURRENT TRAINING CLASS, WHICH IS **GETTING READY TO -- THEY'RE JUST** WRAPPING UP THEIR THREE MONTHS IN THE CLASSROOM AND SCENARIOS AND DRIVER TRAINING, EVERYTHING ELSE WE THROW AT THEM, AND THEY'RE GOING TO BEGIN THEIR FIELD INTERNSHIP STARTING THIS WEEKEND. THEY CALL IT IMMERSION ROUND. BEFORE THEY GO INTO NHE TRAINING TRUCKS WHERE THEY'LL BE BASICALLY OPERATING AS REGULAR AMBULANCE WITH TWO TRAINEES AND A TRAINING OFFICER, HANDS-ON FOR THE NEXT THREE MONTHS COMPLETING THEIR TRAINING. THEN WHEN THEY SUCCESSFULLY PASS THAT, THEY GET PROMOTED FROM **RECRUIT TO EMP.** WE'LL GIVE NOTICE OUT FOR THAT CEREMONY AS WELL. FIELD OPERATIONS. BOSTON EMS, WE OPERATE 21 BLS UNITS, FIVE ALS UNITS FROM 15 STATIONS CITYWIDE DURING PEAK HOURS. IT IS THE DAY AND EVENING SHIFT. WE COME TO 14 AMBULANCES **COVERING THE CITY BETWEEN 2:00** A.M. AND 6:00 A.M. WE TRY TO MATCH RESOURCES TO OUR CALL VOLUME AS BEST WE CAN. SEVERAL CREWS SHIFT CHANGE AT THE STATION, AND WE POST A MORE STRATEGIC LOCATION WHICH IS DETERMINED BY CALL VOLUME. THERE'S MORE AMBULANCES THAN THERE ARE STATIONS, SO SOME PLACES WE DO HAVE TO DOUBLE UP AND GO OUT AND DO COVERAGE. ON THAT MAP ON THERE IS A MAP

WHICH DENOTES AMBULANCE STATIONS AS WELL AS WHERE BOSTON EMS AMBULANCES ARE POSTED. DISPATCH OPERATIONS. 911 CALLS ARE HANDLED BY UNIFORMED MEMBERS OF BOSTON EMS AND EMTs. THEY ALL WENT TO THE EXACT SAME TRAINING TO BE COMPETENT IN THE FIELD. SOME OF THEM WORK BOTH SIDES. THEY WORK IN THE AMBULANCE. SOME TAKE THIS ADDITIONAL TRAINING PROGRAM UP IN DISPATCH **OPS WHERE THEY GO THROUGH MUCH** MORE TRAINING WHERE THEY GET CERTIFIED TO DO EMERGENCY MEDICAL DISPATCH WORK WITH THE STATE'S E-911 SYSTEM AND NOW **TEXT TO 911.** THEY GET INVOLVED IN CALL ENTRY, CALL SCREENING, PRIORITIZING CALLS TO DISPATCH, DISPATCHING, AND C-MED WHERE WE COORDINATE FIELD UNITS WITH HOSPITALS, NOTIFICATIONS TO HOSPITALS OR COORDINATE DISASTER COVERAGE OR THE DISTRIBUTION OF PATIENTS AT LARGE EVENTS SUCH AS THE BOMBING BACK IN 2013. A LOT OF SUCCESS FOR PATIENTS SYSTEMWIDE WAS DUE TO THE FACT THAT PATIENTS WERE VERY EVENLY DISTRIBUTED, PARTICULARLY THE CRITICAL PATIENTS. CMED, UTILIZING OUR SYSTEM, WERE ABLE TO FEED THE RIGHT PATIENTS TO THE RIGHT HOSPITAL AT THE RIGHT TIME. THAT WAS PARTICULAR LIFE SAVING THAT DAY AND EVERY DAY. WE HAVE RESEARCH TRAINING AND QUALITY IMPROVEMENT DIVISION. IT HAS A FULL-TIME ACCREDITED TRAINING ACADEMY. IT PROVIDES CONTINUING EDUCATION FOR ALL UNIFORMED PERSONNEL. TONIGHT. WE START ANOTHER 24-HOUR TRAINING CYCLE WHERE WE'LL BE TRAINING ON ALL THREE SHIFTS. IT'S A RIGOROUS SIX-MONTH TRAINING PROGRAM FOR NEW EMTs AND A THREE-MONTH INTERNSHIP FOR

PARAMEDICS WHO GET PROMOTED HERE AS WELL. THERE'S SIMULATION LABS UP THERE AS WELL AS OTHER EQUIPMENTS. MOST IMPORTANTLY FOR RECRUITMENT PURPOSES, WE HAVE AN AFFORDABLE BASIC EMT COURSE, WHICH IS OPEN TO THE PUBLIC, WHICH WE'VE **RECENTLY -- WE GIVE PRIORITY** STATUS TO BOSTON RESIDENTS TO TAKE THAT CLASS. IF THERE ARE STILL SEATS AVAILABLE, WE WOULD OPEN IT UP TO NON-BOSTON RESIDENTS, BUT RIGHT NOW WE FILL IT UP QUICKLY WITH BOSTON RESIDENTS. WE HOPE THEY CAN BECOME CERTIFIED EMT SO THEY CAN TAKE THE BOSTON ENTRANCE EXAM. ON THE NEXT SLIDE, WE HAVE OUR EMERGENCY OPERATIONS AND EMERGENCY PREPAREDNESS DIVISION. LAST YEAR, THEY SUPPORTED 849 SPECIAL EVENTS ACROSS THE CITY. THAT KEEPS GROWING EVERY YEAR. WE HAVE A COUPLE OF BIG ONES THIS WEEKEND. ONE IN YOUR NECK OF THE WOODS, COUNCILOR, BOSTON CALLING. IT'S A THREE-DAY EVENT. WE'VE TAKEN ALL OUR SPECIAL **EVENTS -- THE PREMISE OF OUR** PLANNING GOING ON IS WE WANT TO COVER THE EVENT, COVER THE SPECTATORS. THE TALENT. THE CONCERTGOERS OR WHATEVER THE EVENT IS. TAKE CARE OF THE PUBLIC SAFETY OFFICIALS WHO ARE THERE AS WELL BECAUSE SOMETIMES IT IS IN HOT WEATHER IN THE SUMMER OR COLD WEATHER LIKE IN A SPORTS PARADE WHEN THE PATRIOTS WIN, BUT OUR GOAL IS WE DON'T STRIP THE NEIGHBORHOODS FOR COVERAGE OR HAVE THEM HAVE TO WAIT FOR AMBULANCE RESPONSE BECAUSE WE'RE TIED UP TAKING CARE OF MAYBE MULTIPLE MINOR INJURIES OR GETTING MULTIPLE **RESPONSES AT AN EVENT, SO THAT'S** OUR PLAN AGAIN THIS WEEKEND FOR THAT. WE WILL HAVE MEDICAL STATIONS ON SITE THERE.

WE'RE GOING TO HAVE OUR EMS PHYSICIANS THERE AS WELL. MAYBE IF WE HAVE TO TREAT AND **RELEASE SOME PEOPLE, WHICH** NORMALLY PHYSICIANS CAN DIRECT THAT. BECAUSE WE'RE OBLIGATED TO TRANSPORT UNLESS SOMEBODY REFUSES, THAT WILL MAKE US A LITTLE MORE EFFICIENT. WHENEVER WE MEET WITH THE PROMOTERS, WHEN ASSISTED, THEY HAVE TO HIRE A CERTAIN AMOUNT OF COVERAGE BECAUSE -- LAST YEAR. ONCE OR TWICE WE HAD TO BRING IN AMBULANCE 14 OR 9 TO HELP US OUT WITH THE TRANSPORT. THAT'S AN EXAMPLE OF HIGHLIGHTING BECAUSE THAT STARTS TOMORROW. THIS WEEKEND THERE ARE OTHER EVENTS. NOW WE HAVE TO HOST A STANLEY CUP PARTY ON THE PLAZA FRIDAY NIGHT. OUR SPECIAL OPERATIONS AND EVENTS WILL BE BUSY. WE DO EXTENSIVE PLANNING AND COORDINATION EFFORTS WITH THE CITY AND REGIONAL PARTNERS. **OBVIOUSLY THE MARATHON, THE TALL** SHIPS OR WHAT HAVE YOU. WE DO A LOT OF TRAINING AND EXERCISE TO PREPARE OUR PERSONNEL FOR ALL HAZARDS. TWO YEARS AGO, WE GEARED UP FOR THE POTENTIAL OF TAKING CARE OF PATIENTS WITH EBOLA. WHICH THERE ARE SEVERAL CASES AROUND THE COUNTRY. SOME OF THE CASES CROPPED UP IN TEXAS. WE'LL DO SPECIAL TRAINING AROUND OTHER THREATS. NEUROLOGICAL EMERGENCIES OR NERVE AGENT -- ANYTHING THAT YOU CAN CONSIDER WE SHOULD PLAN FOR IN ADVANCE. WE'VE BEEN DOING A LOT OF TRAINING. WE'VE BEEN WHEELING OUT MORE TRAINING WITH THE BOSTON POLICE FOR OUR INCIDENTS TO COORDINATE EFFORTS BETWEEN POLICE FIRE AND EMS SHOULD THERE BE SOME SORT OF

MASS SHOOTING, SHOULD THERE BE SOME SORT OF VEHICLES INTO CROWDS, THINGS WE SEE AROUND THE WORLD. WE ALREADY HAVE HAD BOMB SCARES, BUT WE HAVE TRAININGS. WE HOPE IT'S NEVER GOING TO HAPPEN AGAIN. THEY DO PUBLIC SAFETY, LIFE-SAVING SKILLS EDUCATION. THEY'RE PRESENT AT A LOT OF COMMUNITY MEETINGS AND EVENTS. WE REGULAR SCHEDULE CAR SEAT CHECKS AND INSTALLATIONS AT OUR MATTAPAN FACILITY. A LOT OF RESIDENTS TAKE ADVANTAGE OF THAT. WE GET A LOT OF GREAT PRAISE AND THANK YOU FOR THAT. WE ALSO HAVE A PROGRAM WHERE PEOPLE HAVE DIFFICULTY AFFORDING CAR SEATS. WE CAN GET THEM FOR LOW COST OR EVEN NO COST IN SOME CASES TO ASSIST THEM TO MAKE SURE WE CAN REALLY PREVENT INJURIES. WE OFFER CPR TRAINING. WE DO A LOT OF TRAINING WITH COMPRESSION-ONLY CPR. EVEN THOUGH IT IS GREAT IN A **BUILDING LIKE THIS WE HAVE AEDs** ON ALMOST EVERY FLOOR, ONE OF THE BIGGEST THINGS WE FOUND IN OUR CARDIAC ARREST SURVIVAL DATABASE WAS THAT IF YOU RECEIVE CPR, EVEN IF IT WAS COMPRESSION ONLY, NO RESCUE BREATHING, THAT **GREATLY ENHANCED THE CHANCES** THAT YOU WOULD LIVE TO BE **RESUSCITATED AND DISCHARGED FROM** THE HOSPITAL. THAT'S ONE OF OUR GOALS, TO KEEP PUSHING THAT TRAINING TO AS MANY PLACES AS WE CAN. WE DO A LOT OF PROGRAMS WITH SENIORS. THE FILE OF LIFE PROGRAM, WORKING WITH ADVANCED DIRECTIVES AND MEDICAL ORDERS FOR LICENSED TREATMENT TO ENSURE OUR PERSONNEL UNDERSTAND. SOMETIMES IT IS VERY STRESSFUL FOR OUR FAMILIES TO DEAL WITH. WE WANT TO MAKE SURE THEY KNOW

WHAT TO EXPECT FROM EMS WHEN THEY ARRIVE. ON THE SCENE, IF THEY HAVE AN ADVANCED CARE DIRECTIVE OR HEALTH CARE PROXY, WE MAKE SURE THE FOLKS ARE WELL-VERSED IN THAT SO WE CAN HANDLE THOSE SITUATIONS. THEY ALSO WORK WITH THE MAYOR'S OFFICE OF EMERGENCY MANAGEMENT ON PUBLIC HEALTH ISSUES TO MAKE SURE PEOPLE ARE READY TO SUSTAIN THEMSELVES DURING EMERGENCIES. ON THE NEXT SLIDE, JUST SOME OF THE SUPPORT SERVICES. THE MAJORITY OF OUR DEPARTMENT IS UNIFORMED STAFF, EMTs AND PARAMEDICS WORKING IN THE FIELD OR UP IN DISPATCH, BUT WE ARE FORTUNATE THAT WE DO HAVE A SMALL BUT VERY COMPETENT FLEET DIVISION WHO MAINTAIN THE SERVICE ON OUR AMBULANCES AND OUR SUPERVISORY AND OTHER SUPPORT VEHICLES. THEY'RE ALL LICENSED IN-HOUSE MECHANICS. THEY'RE ASE CERTIFIED. THEY'RE AMBULANCE MANUFACTURER CERTIFIED. IT HELPS US WITH SOME OF THE WARRANTY AS WELL TOO BEFORE WE HAVE TO SEND STUFF OUT. MATERIALS MANAGEMENT IS WHERE THEY STOCK ALL OF OUR MEDICAL SUPPLIES, EQUIPMENT, DRUGS, DO THE ORDERING, MAKE SURE THE **EXPIRATION DATES ARE IN CHECK** BEFORE THEY GET SENT OUT TO THE AMBULANCES. WE HAVE GAINED SOME EFFICIENCY THERE IN THE LAST YEAR OR TWO NOW WHERE -- YOU HAVE TO KEEP A CERTAIN AMOUNT OF STOCK ON HAND TO MAKE SURE YOU ALWAYS HAVE AT LEAST A COUPLE OF WEEKS EXTRA IN CASE OF DISRUPTION IN SERVICES OR SHORTAGES COME UP. BUT EVERYTHING WE HAVE IN MEDICAL SERVICES HAS AN EXPIRATION DATE ON IT, SO YOU DON'T WANT THINGS GOING BAD ON THE SHELF. SOME OF THE OTHER THINGS WE TRY TO DO -- A COUPLE YEARS AGO, WE

WANTED TO SAVE MONEY ON -- WE'VE ALL SEEN STORIES ABOUT THE EXORBITANT COSTS OF EPIPENS. PARAMEDICS CAN DO INJECTIONS. THEY CAME UP WITH THESE CHECK AND INJECT KITS WHERE WE ESSENTIALLY COULD DO THE SAME THING BUT WITHOUT HAVING TO USE THE PEN BECAUSE PEOPLE ARE QUALIFIED. NOW THE STATE HAS ACTUALLY EMBRACED THAT AND GOING TO MAKE THAT AVAILABLE FOR EMTs AS WELL TOO. THAT'S MEDICATION THAT'S FAIRLY EXPENSIVE. THE DELIVERY SYSTEM, THE AUTO-INJECTOR. ANYTIME WE CAN GAIN EFFICIENCIES THERE -- AND BY THAT, I MEAN SAVING MONEY -- THAT'S IMPORTANT BECAUSE OUR NON-PERSONNEL COSTS, WE ALWAYS TRY TO MANAGE THOSE WELL AS WELL. TECHNOLOGY SERVICES. THEY MAINTAIN AND MANAGE THE DEPARTMENT'S TECHNICAL SOLUTIONS, INCLUDING VOICE AND DATA SYSTEMS AND OUR COMPUTER NEEDS. WE'VE BECOME MORE AND MORE DEPENDENT ON ELECTRONIC DEVICES. THE AMBULANCES HAVE ONE COMPUTER THAT WORKS. THE MOBILE WORKSTATION, GETTING THE CALL INFORMATION FROM DISPATCH, FROM 911, THE ROUTING, THE MAPPING, EVERYTHING JUST **KEEPS GETTING MORE** SOPHISTICATED. THE CREWS USE AN ELECTRONIC CHART FOR THE LAST TEN OR MORE YEARS NOW TO RECORD OUR PATIENT CARE RECORDS AND TRANSMIT IT TO THE HOSPITAL. THAT'S A TABLET-BASED THING. WE ENSURE THOSE THINGS ARE WORKING SECURELY. THEY HAVE TO BE VERY SECURE BECAUSE OF THE CONFIDENTIAL INFORMATION THAT'S ON THEM. THEY MAINTAIN THAT AS WELL AS OUR OFFICE TECHNOLOGY NEEDS.

FACILITIES DIVISION. JOHN MANAGES ALL OF OUR DEPARTMENT FACILITIES WORKING ALONG WITH THE FACILITIES UNIT UP AT THE PUBLIC HEALTH COMMISSION AS WELL. BUT HE HAS TO INTEGRATE A LOT BECAUSE IN SOME PLACES WE RENT. IN SOME PLACES WE SHARE SPACE. WHETHER IT IS POLICE OR PUBLIC WORKS, SO IT'S HAVING GOOD PARTNERSHIP WITH ALL THESE SITES THAT WE HOST WITH AND BEING ABLE TO WORK -- LIKE WHAT'S OUR **RESPONSIBILITY VERSUS THE OWNER** VERSUS THE LANDLORD. IT'S BUSY KEEPING UP WITH ALL THAT, BUT WE'RE GRATEFUL THAT WE HAVE A FACILITIES DIVISION. ADMINISTRATION AND FINANCE. THE COMMISSION HAS ADMINISTRATION, FINANCE, AND A BUDGET OFFICE, BUDGET DIRECTOR. WE HAVE A LOT OF DAY-TO-DAY NEEDS TO MAKE SURE WE'RE IN COME PLINS -- COMPLIANCE WITH THAT AND THE CITY STANDARDS AS WELL. WE WANT TO MAKE SURE THAT WE'RE FOLLOWING THE COMMISSION GUIDELINES. THE NEXT SLIDE. OTHER THINGS, TOO, BECAUSE WE ARE A BUREAU OF PUBLIC HEALTH --JUST A QUICK SLIDE. YOU SAW THIS DURING THE BUDGET PRESENTATION LAST WEEK WHERE PUBLIC HEALTH. WE WANT TO MAKE SURE WE'RE IN ALIGNMENT WITH PUBLIC HEALTH STRATEGIC PLAN IN THEIR FOUR PRIORITY AREAS -- RACIAL JUSTICE AND HEALTH EQUITY, WORKFORCE DEVELOPMENT, INFORMATICS AND DATA, AND COLLABORATIVE PARTNERSHIPS. THAT'S SOMETHING THAT WE'RE

SEAMLESSLY ABLE TO FALL INTO BECAUSE THAT IS VERY MUCH WHAT WE DO EVERY DAY AND CERTAINLY ALWAYS SHARE THOSE PRIORITIES AS I THINK MOST CITY DEPARTMENTS DO.

IT MAKES IT REALLY EASY TO HAVE

THOSE CROSS-CUTTING EFFORTS. NEXT SLIDE. OUR FY '19 ACCOMPLISHMENTS. ONE WAS WE DID WELCOME THE WORKFORCE DEVELOPMENT CITY ACADEMY, THAT OPPORTUNITY THAT CAME ALONG. I KNOW WE TALKED ABOUT IT LAST YEAR. IT HAS ALREADY STARTED TO PAY DIVIDENDS. THE FIRST CLASS OF PEOPLE --THESE WERE CITY RESIDENTS THEY WERE PRESCREENED, PRESELECTED BY THE CITY'S ACADEMY BY THE MAYOR'S OFFICE OF WORKFORCE DEVELOPMENT FOR ADMISSION INTO OUR EMT TRAINING CLASS. THEY WERE GIVEN BASICALLY A SCHOLARSHIP FOR THEIR FEES AND THEIR BOOKS. THEY GOT SOME ADDITIONAL TRAINING IN A FEW DIFFERENT THINGS TO HELP PREPARE THEM TO MAKE THEM GOOD SUCCESSFUL CANDIDATES. WE'LL HAVE EIGHT OF THOSE WHO GOT CERTIFIED THIS PAST WINTER WHO WILL BE JOINING US IN OUR RECRUIT CLASS. THEY JUST CAME TO OUR RECRUIT CLASS THAT STARTS JUNE 24 --OKAY, THIS MONTH. WE'LL GET IT IN THIS FISCAL YEAR BY THAT MUCH. THERE'LL BE A CLASS OF 28 THAT'S COMING ON. BECAUSE THAT WILL **INCLUDE THE FOUR ADDITIONAL FTEs** THAT YOU HAVE APPROVED. IT'S INCLUDED THIS YEAR AS WELL AS FOR THE VACANCIES WE HAVE, **BECAUSE WE DID GET THE 20** ADDITIONAL FTEs LAST YEAR. EVEN THOUGH WE GRADUATED TWO RECRUIT CLASSES, WE'RE STILL TRYING TO CATCH UP WITH SOME **RETIREMENTS AND SOME OTHER FOLKS** WHO HAVE DECIDED TO MOVE ON TO OTHER OPPORTUNITIES, SO WE HAD A LITTLE BIT OF -- I'M STUMBLING FOR THE WORD. LAST WEEK, TRYING TO MAKE UP FOR THAT AND KEEP THE CLASSES FILLED.

>> HOW MANY POSITIONS ARE OPEN, JIM? >> WHAT'S THAT? >> HOW MANY POSITIONS ARE UNFILLED? YOU HAVE 95 UNIFORMED PERSONNEL. **RIGHT**? >> I THINK WE HAD ABOUT 18 OR 19 VACANT POSITIONS. FROM OUR UNIFORMED RANKS. ANTICIPATING THAT, WE USE PUBLIC HEALTH TO PUT A CLASS ON. HISTORICALLY. SOME PEOPLE DROP OUT OR THEY DECIDE MAYBE THIS ISN'T REALLY QUITE FOR ME, BUT WE ALWAYS WANT TO GET 100% THROUGH. BY THE TIME WE FINISH A SIX-MONTH TRAINING PROGRAM, WE'RE GOING TO HAVE OTHER PEOPLE MOVE ON. WE USED TO AVERAGE ABOUT 13 PER YEAR. SOME YEARS A LITTLE BIT MORE. SOME YEARS A LITTLE BIT LESS. NONETHELESS, SOME YEARS A LITTLE BIT MORE. ON AVERAGE BEFORE, IT WAS ABOUT 13 PER YEAR THAT WOULD BE MOVING ON. **RIGHT NOW WITH THAT CLASS THAT'S** COMING ON -- THE CLASS THAT'S CURRENTLY IN THE ACADEMY, THOSE VACANCIES WILL BE GONE IN A COUPLE WEEKS WHEN THIS CLASS OF 28 STARTS BECAUSE WE'LL BE HOLDING THEM OVER FOR A LITTLE BIT UNTIL THE NEW BUDGET KICKS IN ON JULY 1. IMPROVED EMPLOYEE RETENTION, THAT WAS ONE OF OUR GOALS. A FEW THINGS WE WERE TRYING TO DO WITH THAT WAS, ONE, MEETING **REGULARLY WITH THE PATROL AND** EMS DIVISION. WE ENERGIZED ONE OF THE COMMITTEES WE HAD AROUND CAREER LADDERS AND TRAINING. AGAIN, TRYING TO INCREASE NOT JUST OPPORTUNITIES INSIDE FOR ADVANCEMENT BUT ALSO JOB SATISFACTION. WE HAVE A LOT OF BRIGHT EAGER PEOPLE WHO WORK HERE, WHO ARE

**BUSY PERFORMING THEIR DUTIES** EVERY DAY IN THE AMBULANCES AND UP IN DISPATCH, BUT WE HAVE OTHER INTEREST TO BRING IN THINGS TO EXPAND OUR SKILL SET OR PAY. MAYBE WE SHOULD DO MORE TRAINING WITH THIS DEPARTMENT OR WITH SOME OTHER THINGS THAT THEY SEE OR OTHER AGENCIES OR WHATEVER. WE'VE BEEN OPEN TO THOSE IDEAS AND TRYING TO DEVELOP OUR PERSONNEL AT ALL RANKS BY DOING THAT. TAKING ADVANTAGE OF A LOT OF FREE COURSES THAT THE FEDS OFFER DOWN IN EMMITTSBURG OR IN OTHER PLACES. IT GIVES YOU A LITTLE BIT OF A BREAK FROM YOUR DAILY GRIND, AND IT HELPS DEVELOP YOU AND PREPARE YOU FOR POTENTIAL ADVANCEMENT DOWN THE LINE. SPEAKING OF THAT, WE PROMOTE PARAMEDICS FROM WITHIN, BUT WE HAVE THAT PARAMEDIC CERTIFICATION TO BE ABLE TO TAKE OUR PROMOTIONAL EXAM FOR THAT. A LOT OF PEOPLE GO OUT AND GET TRAINING FOR THAT AT SEVERAL INSTITUTIONS AROUND, BUT WE TRY TO PARTNER WITH THEM, TRY TO LOOK AT WAYS TO IMPROVE THE PATH OF PROMOTION. I THINK THEY REALIZED IT LOOKS FOR THEM WHEN THEY HAVE BOSTON EMS GRADS TAKE THEIR PROGRAM. SO A COUPLE OF THEM NOW BEGIN TO OFFER DISCOUNTS TO PERSONNEL WITH A CERTAIN NUMBER OF --OTHERS ARE GOING TO COPY ON TO THAT, WANT TO BE A PART OF THAT WHERE THEY'LL GIVE SOME DISCOUNT IN TUITION BASED ON VOLUME IF THEY GET AT LEAST A CERTAIN NUMBER OF OUR PERSONNEL THAT SIGN UP FOR A PARTICULAR CLASS. OUITE FRANKLY. IT SPEAKS WELL OF THEIR PROGRAM IF SOMEBODY WHO WORKS HERE PURSUES THEM FOR ADVANCED EDUCATION. COMMUNITY COLLEGES HAVE

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PARTNERED WITH US BECAUSE THEY HAVE PEOPLE WHO HAVE TAKEN EMT TRAINING AND ALS TRAINING. THEY'LL GIVE YOU CREDITS TOWARD THEIR ASSOCIATE DEGREE PROGRAMS OVER THERE SHOULD THEY WANT TO PURSUE THAT. WE'RE TRYING TO DO AS MUCH AS WE CAN TO HELP ADVANCE OUR PERSONNEL. **BEING ABLE TO HIRE AND BRING** PEOPLE IN, THOSE 20 EXTRA POSITIONS YOU GAVE US HELPS US TO DO PROMOTIONS AND ASSIGNMENTS. BECAUSE FOR SEVERAL YEARS, WHEN WE HAD -- WELL, BASICALLY A HIRING FREEZE AFTER 2013 WHEN THE BUDGET WAS TIED UP A WHILE OR TEN YEARS AGO WHEN THERE WAS THE HOUSING BUBBLE THAT BURST. WE WERE CANCELLING CLASSES WITH POLICE, FIRE, AND EMS. IT TOOK A WHILE TO COME BACK FROM THAT. AND WE'RE JUST NOW GETTING BACK -- THANKS TO YOU ALL -- THE LEVELS IN 2008 AND 2009. WE NEEDED AS MANY PEOPLE IN DISPATCH AND AMBULANCES EVERY DAY TO TRY TO KEEP THE LIGHTS ON, KEEP DELIVERING SERVICES. BY GETTING THE FRESH BLOOD COMING IN, THE NEW RECRUITS AND EMT, WE'RE ABLE TO CATCH UP ON OUR PROMOTIONS THE LAST COUPLE YEARS. OUR SUPERVISORS, TRAINING CAPTAIN, DEPUTIES. WE WERE SHORTHANDED IN ALL THOSE RANKS. SO THAT'S BEEN VERY HELPFUL FOR US. LAST YEAR, WE EXPLORED CLINICAL INNOVATIONS. WE TALKED ABOUT SOME OF THAT WITH THE EPINEPHRINE AS WELL AS CPAP AND OTHER INITIATIVES THAT THE STATE IS LOOKING AT NOW. ON THE NEXT SLIDE, I DID MENTION THE CITY ACADEMY. AGAIN, THIS IS SOMETHING THAT YOU ALL VERY MUCH SUPPORTED AND THE MAYOR WAS VERY SUPPORTIVE OF IT. WE HAD ONE COHORT IN THAT GROUP FROM CITY ACADEMY WHO WENT ON TO GET THEIR COMMERCIAL DRIVER'S LICENSE BECAUSE THE CITY **IDENTIFIED THAT THAT WAS ONE** BARRIER TO EMPLOYMENT FOR THE CITY. FOR A LOT OF CITY DEPARTMENTS, THEY NEED CDL. YOU KNOW, PARKS, BTD, PUBLIC WORKS OF COURSE. YOU HAD TO HAVE THAT BEFORE YOU COULD EVEN APPLY. SORT OF LIKE YOU HAVE TO HAVE EMT CERTIFICATION BEFORE YOU APPLY WITH US. THEY SAID LET'S DID THAT. ANOTHER COHORT IN THAT FIRST GROUP THERE WERE PEOPLE THAT WANTED TO PURSUE CAREERS TO BE EMTs, WHICH WAS A LITTLE BIT OF A HEAVIER LIFT. THESE PEOPLE WERE DEDICATED. THEY TOOK A FOUR OR FIVE-MONTH EMT TRAINING CLASS AS WELL AS MANAGING THEIR PERSONAL LIVES. A COUPLE OF THEM STAYED ON AS INTERNS FOR US WHILE THEY WERE WAITING TO SIT AND TAKE THEIR EXAMS. THE CITY REALLY DID TRY TO PUT THEM IN THE BEST POSSIBLE POSITION TO PASS THE CLASS AND TO EVENTUALLY PASS OUR ENTRANCE EXAM, THE APTITUDE TEST. THERE WERE A LOT OF OTHER CANDIDATES THAT SCREENED. THEY DID A BRIDGE COURSE TO HELP PEOPLE GET USED TO STUDYING AND TAKING TESTS IF THEY'VE BEEN OUT OF SCHOOL FOR A FEW YEARS. ACTUALLY, THEY DID QUERIES ON THEM. THEY CONFIRMED THEIR RESIDENCE AND CHECKED THEIR DRIVING HISTORY AND LICENSE. THAT'S WHAT YOU NEED TO DO TO APPLY FOR US EVENTUALLY, SO THEY WANTED TO PUT THAT IN THEIR MIND-SET RIGHT FROM DAY ONE. IF YOU'RE SERIOUS ABOUT WORKING AT BOSTON EMS, WE'RE GOING TO START BUILDING THIS IN RIGHT FROM THE BEGINNING. JUST TAKING THE EMT CLASS SOMEWHERE WE COULD NEVER DO

THAT.

WE WOULDN'T EXPECT PEOPLE TO DO THAT, BUT THE CITY, THEY'RE INVESTING IN THIS. THEY WANTED TO BE SERIOUS WITH THEIR STUDENTS AS WELL. ADVANCED EMS AND CITY SERVICES THROUGH ANALYSIS OF EMS DATA. THAT WAS ANOTHER THING THAT WE WANTED TO DO LAST YEAR. THE DATA REPORTING. VISION ZERO IS ONE OF THE THINGS THAT WE'VE BEEN SUPPORTING FOR YEARS. BOSTON HAS CONTINUED TO SUPPORT SAFETY MEASURES BY THE USE OF OUR DATA NOT TO IDENTIFY A HOT SPOT, BUT WE CAN GET DOWN TO VARIOUS LEVELS LIKE WHERE THERE WAS A CAR INVOLVED OR A BIKE VERSUS BICYCLIST. PEOPLE TAKE VERY GOOD CARE WHEN THEY'RE DOCUMENTING. WHETHER A HELMET WAS USED OR WHATEVER. TRYING TO MAKE THIS DATA NOT JUST NUMBERS, BUT WHAT CAN YOU DO TO INFORM POLICY, TO INFORM WHERE TRAFFIC COUNTING MEASURES WOULD COME UP? YOUR CONSTITUENTS COME TO YOU ALL THE TIME LOOKING FOR ONE-WAYS AND STOP SIGNS AND BIKE LANES AND WHAT HAVE YOU. HOW DO YOU PRIORITIZE ALL THOSE **REOUESTS**? SO WE TRIED FOR THE LAST SEVERAL YEARS TO GIVE THEM DATA THEY CAN USE. I'LL GIVE YOU A QUICK ONE. IN '18, WE DOCUMENTED 425 CYCLIST CRASHES OR INCIDENTS ON **BOSTON STREETS.** THAT'S A 24% REDUCTION FROM 2013 WHEN THERE WAS 570, SO BOSTON IS GETTING BETTER AT THAT. THERE'S CERTAINLY NO LESS **BICYCLISTS OUT THERE, SO THAT'S** ENCOURAGING. WE'RE NOT PICKING THEM UP. PEDESTRIANS, YEAR '18, WE **DOCUMENTED 680 INCIDENTS WHERE** WE TOOK CARE OF A PEDESTRIAN. THAT'S A 24% REDUCTION SINCE 2016.

AND WE MAKE THAT DATA PUBLICLY **AVAILABLE SO THE BIKE COMMUNITY** ARE ABLE TO LOOK AT THAT. AND WE REPORT IT OUT TO THE STATE AS WELL AS TOO. IT'S A GOOD EFFORT TO HELP WITH THOSE NUMBERS. BECAUSE CALL VOLUME GOES UP. WE DON'T MIND TRYING TO REDUCE INCIDENTS LIKE THAT. I'M SORRY. WE ALSO WORK VERY CLOSELY WITH THE OFFICE OF RECOVERY SERVICES, BUREAU OF RECOVERY SERVICES HERE AT THE COMMISSION TO REALLY TRY TO HELP INFORM THEM WITH EFFORTS AS WE ALL DEAL WITH THIS ONGOING OPIOID CRISIS. WE COORDINATE WITH THE BOSTON POLICE DEPARTMENT, TRYING TO SUPPORT THEIR CO-RESPONDER PROJECT. THERE'S INCREASING NUMBER OF CALLS OUT THERE OF PEOPLE WITH PSYCHOLOGICAL EMERGENCIES. SOMETIMES YOU'RE GOING BACK AND FORTH TO THE EMERGENCY ROOM A COUPLE TIMES A WEEK, A MONTH. IT ISN'T NECESSARILY THE BEST ANSWER, AND SOME THINGS GET A LITTLE BIT COMPLICATED TRYING TO SORT THEM OUT, SO BPD DO HAVE CLINICIANS AND THREE OR FOUR CRUISERS IN DIFFERENT DISTRICTS NOW. WE'RE TRYING TO WORK WITH THEM TO SEE IF THEY CAN FREE UP SOME OF US ON CALLS BUT ALSO TO COMPLEMENT US IF WE DO HAVE PATIENTS THAT WE CAN MAYBE TALK TO THEM ABOUT TAKING HEALTH CARE SERVICES FOR THEM. OUR FY '20 INITIATIVES. WE ASKED FOR THESE. THESE DID COME IN THE BUDGET. WE WANTED TO EXPAND OUR COMMUNITY ASSISTANCE TEAM TO SEVEN DAYS A WEEK. IT WAS LAUNCHED BACK ON OCTOBER 30th. AS OF APRIL 30th, THE NUMBERS --THERE WAS OVER 3500 TOTAL INCIDENTS THAT THEY RESPONDED TO.

77% OF THOSE RESPONSES DID NOT **RESULT IN AN AMBULANCE** TRANSPORT. OVER 1.000 TIMES THEY WERE ABLE TO CANCEL AN AMBULANCE THAT WAS COMING IN. OVER 1,000 TIMES THEY WERE ABLE TO MAKE REFERRALS TO RECOVERY SERVICES OR A SHELTER. WHY IS THAT IMPORTANT? WE DECIDES IT IS GOOD FOR THE PATIENTS. SOMETIMES PEOPLE DON'T NECESSARILY, EVEN THOUGH THERE'S AN ISSUE, HAVE TO GO TO AN EMERGENCY ROOM. ANOTHER THING THAT WAS AFFECTING THAT WAS A COUPLE YEARS AGO THE DEPARTMENT OF INFORMATION AND TECHNOLOGY, THEY DID SOME ANALYSIS OF OUR CAD DATA, OUR 911 CALL SYSTEM. THEY GENERATED HEAT MAPS OF A COUPLE DIFFERENT AREAS WHERE WE WOULD SEE FREQUENT CALLS FOR **UNKNOWN AMBULANCES OR PRIORITY 1** CALLS WHERE WE DIDN'T GET GOOD INFORMATION ON. BECAUSE OF THAT, AN AMBULANCE GETS DISPATCHED. IT'S A PRIORITY 1 CALL. POLICE AND FIRE ARE ALSO ADDED TO IT. ONE AREA THEY NOTICED WAS LIKE DOWNTOWN, THE COMMON, DOWNTOWN CROSSING, HERE ON CAMBRIDGE STREET. 75% OF THOSE CALLS WOUND UP NOT **RESULTING IN AN AMBULANCE** TRANSPORT. IT WAS SOMEBODY THAT WAS IN NEED OF SOME OTHER SERVICES. MAYBE IT WAS SOMEBODY WHO WAS TRYING TO GET INTO A SHELTER OR SOMEBODY WHO HAD SOME ISSUES AROUND DRUGS OR ALCOHOL OR MAYBE SOME STREET OUTREACH OR OTHER THINGS WERE APPROPRIATE. FRANKLY THEY DIDN'T WANT TO GO AND THEY WERE REFUSING, BUT THEY WERE UNSTEADY, SO WE WERE TRYING TO GET THEM REFERRED TO OTHER SERVICES, WHETHER HOMELESS OUTREACH OR OTHER THINGS OUT

THERE.

ONE TIED UP AN AMBULANCE TRYING TO SORT THAT OUT. THAT AMBULANCE WOULDN'T BE AVAILABLE FOR, SAY, ANOTHER PRIORITY 1 CALL OR ANOTHER CALL. THE SECOND AREA WHERE THERE WAS A HIGH PERCENTAGE OF CALLS IN A SMALLER DENSITY, A SMALL AREA, WAS THE MASS AV CORRIDOR PRETTY MUCH FROM THE SQUARE DOWN PAST WASHINGTON STREET. WE HAVE A HIGH CONCENTRATION OF CALLS. UP THERE, THERE WAS NO TRANSPORTS FOR THESE UNITS WHEN THEY GO OUT, BUT THERE'S A HIGH **INCIDENCE OF REPEAT PATIENTS** THAT WE SEE FAIRLY FREQUENTLY. SOMETIMES MAYBE WE'RE SERVING THEM BETTER IF WE GET THEM TO GO INTO THE ENGAGEMENT CENTER OR SOMEWHERE ELSEWHERE THEY'RE STABLE AND REFUSING TREATMENT. MAYBE THAT'S MORE SPEAKING TO THE PROBLEM THAT THEY NEED SERVICES FOR. AGAIN, COORDINATING AT THE STREET LEVEL WITH THE PROVIDERS THAT ARE OUT THERE. THE CITY IS PUTTING A LOT OF EFFORTS TO ADDRESS THIS, BUT SOMETIMES IF YOU'RE IN AN AMBULANCE AND YOU PULL UP AND YOU HEAR CAN YOU CLEAR TO GO TO ANOTHER CALL, SOMEBODY HIT BY A CAR THREE BLOCKS AWAY FROM THERE, AND THIS PERSON DOESN'T REALLY NEED TO GO, YOU'RE KIND OF TIED UP. YOU CAN'T CLEAR OUT. THE IDEA WAS TO GET A UNIT OUT THERE THAT COULD EITHER DO THAT CALL OR COME RELIEVE YOU SO THAT YOU CAN GET CLEAR. THAT HAS PROVEN TO BE FAIRLY SUCCESSFUL AS YOU CAN SEE BY THE NUMBERS. WE WERE RUNNING IT AS A PILOT PROGRAM. WE'RE STAFFING IT ON THE DAY AND EVENING SHIFT MONDAY THROUGH FRIDAY. OUR REQUEST WAS TO ADD A FEW

MORE FTEs SO WE CAN EXPAND IT TO SEVEN DAYS A WEEK. WE'LL BE ABLE TO DO THAT ONCE WE GET THIS OTHER CLASS ON AND UP AND THE BODIES OUT THERE. DIVERSITY OFFICER WAS ALSO ONE OF THE FTES THAT WE REQUESTED AND IS INCLUDED IN THIS BUDGET. WE'VE ALL SPOKEN TO THE DIFFERENT PUBLIC SAFETY AGENCIES ABOUT THE IMPORTANCE AND THE EFFORTS TO IMPROVE OUR DIVERSITY. WHETHER IT IS IN DEVELOPING PEOPLE, SUCH AS GETTING PEOPLE TRAINED TO BE EMTs, OR RECRUITING THEM OR GETTING THEM THROUGH THE ACADEMY BUT ALSO PROMOTIONS AND TRYING TO DO BETTER AT ALL LEVELS AT THE DEPARTMENT. NO DIFFERENT THAN POLICE OR FIRE. WE TAKE THAT VERY SERIOUSLY. AND WHAT WE WANT TO DO WAS BE ABLE TO DEDICATE SOMEONE -- I THINK WE DO A PRETTY GOOD JOB AT IT RIGHT NOW. THERE'S ALWAYS BEEN THE WILL AND EFFORT AT BOSTON EMS TO DO THIS. ALBEIT IT SO FOLKS FROM TRAINING, SOME FOLKS FROM FIELD OPS, AND SOME OF US GOING TO COMMUNITY THINGS. WE CAN DEDICATE A LITTLE MORE TIME WORKING AT PLACES LIKE CITY ACADEMY OR SCHOOLS TO WORK WITH SOME OF THESE PARTNERSHIPS TO IMPROVE THAT, BUT ALSO TO HELP WITH SOME OF THE RETENTION AND PROFESSIONAL DEVELOPMENT THAT COME WITH GROWING THE SERVICE. ON THE LAST SLIDE IS OUR FY '20 INITIATIVES. ONE IS TO OPTIMIZE IN ADVANCE OUR PATIENT CARE SERVICES. ONCE WE COMPLETE THIS OTHER GROUP OF RECRUITS, WE WILL BE ABLE TO ADD AN ADDITIONAL UNIT ON DAYS AND EVENINGS. WE'LL ALSO BE ABLE TO MAKE SURE ALL OF OUR PROMOTIONS ARE FILLED THERE AS WELL, WHICH WILL BE GOOD. ONE, IT IS GOOD FOR MORALE.

IT IS GOOD FOR THE WORKLOAD FOR THE PEOPLE WHO ARE IN THOSE POSITIONS NOW, WHO ARE MAYBE DOING DOUBLE DUTY. ONE IS WE WANT TO EXPLORE ALTERNATE BILLING AND TRANSPORT MODELS. THERE ARE SOME POTENTIAL -- CMS RECENTLY ANNOUNCED SOME PROGRAMS, BASICALLY LIKE GRANTS WHERE ALTERNATIVE DELIVERY OF CARE MODELS THAT DON'T NECESSARILY RESULT IN TRANSPORT. WE STILL COULD BILL MEDICARE FOR THAT. WHICH WOULD HELP. BECAUSE WHEN WE GO TO A CALL NOW, WE CAN SPEND 45 MINUTES TO AN HOUR AT THE SCENE EITHER TRYING TO CONVINCE SOMEBODY TO GO OR TREATING THEM FOR SOMETHING OR REVERSING THEIR HYPOGLYCEMIA, DOING AN EKG, AND IF THEY DON'T WANT TO GO, WE CAN'T COMPEL THEM TO GO. THE COMPENSATION MODEL IS BUILT TO GET SOMEBODY TO GO TO A HOSPITAL, TO TRANSPORT THEM TO A LICENSED EMERGENCY ROOM. IN SOME CASES, WHEN WE'RE LOOKING AT HEALTH CARE COSTS, THERE ARE MAY BE COMMUNITY ROOMS THAT ARE CHEAPER FOR THE SYSTEM. WE'LL BE ABLE TO TRANSPORT SOMEPLACE ELSE LIKE THE COMMUNITY HEALTH CENTER. LIKE AN ACUTE HEALTH CENTER. WE SHOULD STILL GET COMPENSATED FOR OUR SERVICES THERE BECAUSE WE HAVE TO BE WELL TRAINED TO DO THAT AND IN SOME CASES MORE. WE HAVE THE EQUIPMENT TO DO THAT. BUT WE'RE EXPLORING THOSE NOW. WE'RE ALSO LOOKING TO IMPROVE OUR REVENUE ENHANCEMENT, OUR COLLECTIONS WITH WHAT WE HAVE RIGHT NOW. WHAT WE'VE SEEN OVER THE LAST FEW YEARS IS WORTH ALL THE CHANGES IN HEALTH CARE AND THE HEALTH CARE PLANS THAT ARE COMING OUT. THERE ARE MANY PEOPLE THAT HAVE COVERAGE.

THERE'S LESS PEOPLE UNINSURED. ALTHOUGH, THERE ARE STILL PEOPLE UNINSURED. THERE ARE LESS. BUT THE HEALTH **INSURANCE OUT THERE RIGHT NOW IS** EITHER VERY HIGH DEDUCTIBLES. HIGH CO-PAYS, AND A LOT OF THEM DON'T PAY TOO WELL FOR SERVICES, SO WE'RE TRYING TO MAXIMIZE THAT IN A COUPLE OF DIFFERENT WAYS. WE'LL ALSO BE ISSUING A REQUEST FOR PROPOSALS TO PUT OUT CONTRACT WHO DOES OUR BILLING FOR US, TO PUT THAT OUT BACK TO **BID THIS YEAR TO SECURE A NEW** CONTRACT TO HOPEFULLY GAIN BETTER PERFORMANCE IN THAT FIELD. **BECAUSE IT'S BEEN EVOLVING** CONSTANTLY OVER THE YEARS. I CONTINUE TO PROMOTE DIVERSITY AND PROFESSIONAL DEVELOPMENT. CAN'T SAY IT ENOUGH.

IT WAS THERE IN '19.

IT WAS THERE IN '18. I KNOW IT'S IMPORTANT TO THIS

BODY AND IS ALWAYS INCLUDED IN OUR BUDGET DOCUMENTS, HOW WE'RE

DOING ON THAT.

AGAIN, WE JUST WANT TO

REINVIGORATE THAT.

WE'VE DONE THAT WITH BUNKER HILL, BUT WE'LL BE LOOKING TO DO

IT TO IMPROVE THE PROFESSION

THAT OUR PERSONNEL ARE IN.

ADVANCED COMMUNITY PREPAREDNESS.

WE WANT TO INCREASE OUR

TRAININGS OUT THERE BESIDES CPR.

THERE'S A LOT OF INTEREST IN

STOP THE BLEED AND OTHER

CAMPAIGNS THAT ARE OUT THERE AND

AVAILABLE. WE HAVE ALREADY DONE SOME OF

THAT WITH SOME SMALLER GROUPS.

WE'VE DONE IT HERE.

A FEW MONTHS AGO, WE TRAINED ABOUT 60-PLUS OFFICERS IN THE

SERVICES BUILDING AND OTHER

PLACES.

WE RAN TRAINING FOR CPR, THE AED, TO MAKE SURE THEY WERE CONFIDENT IN USING THE DEFIBRILLATORS. WE DID STOP THE BLEED, WHICH INCLUDED THE USE OF TOURNIQUETS AND SOME SPECIAL GAUZE TO STOP BLEEDING.

WE ALSO DID TRAINING FOR NARCAN ADMINISTRATION.

WE DID THAT WITH A GROUP WHO CAME IN AND PROVIDED INSTRUCTORS FOR THAT TO MAKE SURE THAT THEY FELT COMFORTABLE DOING THAT. SHOULD THE CITY WANT TO START DOING THAT IN PUBLIC BUILDINGS. WE JUST WANT TO KEEP DOING MORE OF THAT ADVANCED COMMUNITY PREPAREDNESS BECAUSE THE COMMUNITY IN MANY CASES OUR OWN FIRST RESPONDERS OUT THERE. ANOTHER PRIORITY FOR US THIS YEAR IN THE INITIATIVES IS TO ADDRESS OUR BOSTON EMS NEEDS, OUR GARAGE NEEDS.

WITH MY ONE RAMBLING SLIDE SHOW THERE --

>> THANKS, JIM.

WE'VE BEEN JOINED BY COLLEAGUES FROM SOUTH BOSTON, COUNCILORS MICHAEL FLAHERTY AND ED FLYNN. AND WE'VE JUST BEEN JOINED BY OUR COUNCIL PRESIDENT, COUNCILOR ANDREA CAMPBELL. JIM, I'M GOING TO START OUT WITH MY ANNUAL INFORMATION REQUEST OF

THE RESPONSE TIMES BY NEIGHBORHOOD, BY PRIORITY.

>> YES.

>> FIRST.

LOOKING AT THE BUDGET SHEET, THE INCREASE FOR EMS IS A LITTLE SHY OF 2%.

WE JUST APPROPRIATED THE MONEY FOR THE MOST RECENT CONTRACTS SETTLED.

DO YOU KNOW WHERE THAT PERCENTAGE WILL END UP? AND I GUESS QUESTION TWO WOULD BE, DOES THAT LEVEL FUND AND KEEP THE SAME AMOUNT OF STAFF AND UNITS BASICALLY THE SAME? >> WELL, MY UNDERSTANDING IS THAT -- WELL, YES, BUT IT ALSO WE SHOULD BE TAKING INTO CONSIDERATION THE ADDITIONAL FOUR FTEs WE'LL BE ADDING THIS YEAR AS WELL AS -- I KNOW THE QUESTION WAS ASKED AT THE PUBLIC HEALTH HEARING LAST WEEK ABOUT THE LINE ITEM FOR THE CITY OF BOSTON SUPPLEMENT AND SUBSEQUENT COMMUNICATION WITH THE BUDGET OFFICE. IT WAS EXPLAINED TO ME THEY HAD NOT PLUGGED IN THAT COST. BECAUSE THAT HAD NOT TAKEN PLACE YET, IT DID NOT APPEAR ON THE DOCUMENT AS WELL AS WHAT THEY WOULD PROJECT IT WOULD BE. WHEN THEY HAVE THAT CALCULATED, THEY TOLD US THAT THE ACTUAL NUMBERS WOULD BE UPDATED IN THAT. BUT I HAVEN'T SEEN WHAT THOSE NUMBERS ARE YET. >> RIGHT. COULD WE TRY TO GET THAT AS WELL, BECAUSE I'M KIND OF TROUBLED? >> YES. >> IF IT IS SHY OF 2%, I DON'T WANT US TO LOSE THE GROUND WE'VE STARTED TO MAKE UP THE PAST FEW YEARS. LOOKING AT THE INFORMATION YOU FORWARDED ON CALL VOLUME, IT SEEMED LIKE IT KIND OF LEVELLED OFF FROM THE PAST COUPLE OF YEARS. A LITTLE LOW, BUT WE'RE STILL NOT HITTING OUR GOALS FOR **RESPONSE TIMES.** THEN WHEN YOU LOOK AT WHERE THE CALL VOLUMES COME FROM ---CENTRAL BOSTON. I THINK WE DID KIND OF A PILOT PROGRAM OF SOME KIND WITH A TRIAGE AROUND THIS AREA OF BOSTON SO THAT WE WOULDN'T HAVE TO RESPOND. HAVE YOU EVALUATED THE SUCCESS OR MAYBE NON-SUCCESS OF THAT PROGRAM? >> SOME OF THAT WAS CERTAINLY INVOLVED IN THAT SQUAD 80. IT'S A NON-TRANSPORT UNIT. IT'S AN SUV. IT'S STAFFED WITH TWO EMTs. THE VEHICLE IS FULLY OUTFITTED WITH -- THEY CAN BE THE FIRST ON SCENE AT A CARDIAC ARREST. THEY CAN DO EVERYTHING THAT AN AMBULANCE CREW CAN DO EXCEPT

TRANSPORT, SO THEY'RE ABLE TO PROVIDE FIRST RESPONSE, BUT THEY'RE ALSO -- AGAIN, THEY'RE ABLE TO HELP CLEAR UP BY EITHER **RELIEVING IF THE AMBULANCE GETS** THERE FIRST OR CANCELLING AN AMBULANCE IF THEY GET THEIR FIRST. IF IT'S A SITUATION WHERE IT IS A LITTLE BIT MORE COMPLICATED, I THINK SOME OF THE RESPONSES THAT WE GET -- IF THERE WAS 340 IN A DAY, THAT COULD RESULT IN 320 TRANSPORTS. LAST WEEK. THAT WAS A FACTOR OF ADD 50 TO EVERYTHING. WHEN WE DON'T TRANSPORT, IN SOME CASES WHERE THE PATIENT REFUSES, THERE'S NOTHING SHOWING. NOBODY IS INJURED. >> BUT THAT TRIAGE GROUP, THE GOAL WAS NOT TO NECESSARILY **RESULT IN A TRANSPORT.** >> YEAH. >> TIE UP THOSE UNITS. >> NOT TIE UP AN AMBULANCE THAT WE MAY NEED FOR ANOTHER CALL SOMEWHERE BECAUSE WE DO HAVE TO -- GIVEN THE NUMBER OF UNITS WE HAVE ON, WE DO PRIORITIZE THE SAME WAY THEY TRIAGE. IF SOMEBODY SHOWS UP AT A HOSPITAL. SOME PEOPLE GO TO A TRAUMA ROOM. SOME PEOPLE GO TO A WAITING ROOM. IT'S MAYBE NOT THE BEST ANALOGY, BUT WE DO TRIAGE THE CALLS IN ORDER OF PRIORITY, ACUITY USING ESTABLISHED GUIDELINES UP IN DISPATCH. BUT WHEN THAT UNIT GOES OUT IN THE FIELD THERE, OUR DISPATCHERS CAN USE THEM IF THEY THINK THIS CALL SOUNDS LIKE A MAYBE. MAYBE SUSPECT OF NOT BEING A TRANSPORT. THE UNITS GET USED TO CERTAIN ATM THINGS IN THE WINTER. FIVE TIMES A DAY PEOPLE ARE CALLING. WE TRY TO ASK IS HE BREATHING. >> YEAH. BUT IT IS HELPING IN THE SENSE

WHEN YOU LOOK AT IT, THEY WERE ABLE TO CANCEL AND FREE UP AMBULANCES, JUST THAT ONE UNIT, OVER 1,000 TIMES IN LESS THAN A YEAR, SO IT DID DEMONSTRATE THAT THERE IS VALUE IN IT. >> WE DON'T GET REIMBURSED FOR THAT TRIAGE TEAM. >> NO. BUT LET ME MOVE ON TO ONE OTHER THING BEFORE MY TIME. NEVER MIND. I'M JUST GOING TO TAKE ONE PRIVILEGE HERE. THE CAPITAL STUFF WITH THE 911 SYSTEM, IT SEEMS TO HAVE BEEN AN ONGOING PROJECT FOR MY ENTIRE TIME ON THE COUNCIL. CAN YOU TELL ME HOW EMS IS INVOLVED WITH THAT NEW SYSTEM? IT'S IN, I BELIEVE, THE POLICE **BUDGET FOR THE 911.** AND I GUESS WHAT I'M LOOKING FOR IS, WHAT'S THE STATUS, WHAT IS THE ROLE THAT EMS PLAYS IN IT, AND WHO, IF THERE IS A CONTACT MAYBE FROM WHOEVER HANDLING THE **PROJECT**? >> AND COUNCILOR, ARE YOU **REFERRING MORE TO THE RADIO OR** TO THE 911 -- FIRST, I'LL START OFF ON THE 911. IT WAS A COUPLE YEARS AGO WHEN THE CITY CHANGED OUR CAD SYSTEM. THEY WENT FROM ONE PLATFORM TO A NEW ONE WITH THE UPGRADES. YES. CAPITAL TOOK CARE OF THAT. THE POLICE, BECAUSE THEY HOST IT AT THEIR BUILDING, THEY MANAGE A LOT OF THE ASPECTS OF IT, BUT WE DO A REPRESENTATION ON THAT AS FAR AS SPECIFIC NEEDS THAT WE NOW HAVE. WE JUST DID A MAJOR UPGRADE ON THE CAD. WE GOT A FEW THINGS CHANGED. EVERY AGENCY DID. POLICE AND FIRE. EVERYONE IS LOOKING AT THE TWEAKS THAT THEY WOULD THEY WEEK TO SEE OUT OF IT. WE HAVE DEPUTY UP IN DISPATCH WHO IS INVOLVED IN THAT REPRESENTING OUR NEEDS AND

DESIRES UP IN THAT. THAT IS PRETTY MUCH MANAGED **THROUGH -- HAS BEEN FUNDED** THROUGH CAPITAL WE DO GET SOME COSTS ASSOCIATED WITNESS. BUT SO FAR FOR THE MOST PART ON THE CAD SYSTEM PART OF 911 FOR SOME OF THE COSTS THAT COME IN ASSOCIATED WITH ENHANCED 911. SOME OF THAT IS PAID FOR THROUGH THE STATE PSAP, PUBLIC SAFETY ANSWERING POINTS. THAT IS MANAGED BY THE BOSTON POLICE. SUPERINTENDENT JOHN DALY IS PRETTY MUCH OVERSEES THAT AREA. SUPERINTENDENT OVER THERE. >> AT BPD. >> YEAH. AS FAR AS 911 SIDE ON THE RADIO SIDE OF THE HOUSE, YES, WE ARE ONE OF THE AGENCIES THAT SEVERAL POLICE, FIRE, PUBLIC WORKS, SCHOOLS, EVERYONE, I'VE BEEN TOLD HAS BEEN SEEKING SOME INFRASTRUCTURE UPGRADES PRINCIPALLY BECAUSE ALL OF OUR INFRASTRUCTURE WAS AGING ALONG WITH THE LEGACY SYSTEMS, WILL NO LONGER BE SUPPORTED BY THE MANUFACTURERS. THE BIGGEST ONE BEING MOTOROLA AND THE COMING YEARS. THERE'S BEEN A CHANGE LIKE. TELEVISIONS, DIGITAL NOW VERSUS ANALOG WHICH, I'M NOT A TECH AUTO SO I CAN'T EVEN -->> WHO IS -- LAST PART, WHAT FROM UEMS IS AT THE TABLE WHEN THIS PROJECT IS BEING IMPLEMENTED. TIME QUESTION IS, CAPITAL THAT IS IN BPD FOR THE SYSTEM FOR POLICE, FIRE AND EMS IS THAT -->> I THINK IT'S BPD, THEY ARE YEAR FIVE OF FIVE YEAR CALL IT THEIR BLUE RADIO LIKE **APPROACHING \$50 MILLION WHICH** WAS MAJOR REDO OF EVERYTHING FROM SOUP TO NUTS TO THE BRAINS OF THE OUTFIT, OF THE SYSTEM WHICH THEY CALL THE CORE UP AT DISPATCH OPERATIONS AND RIGHT DOWN TO PORTABLES AND RADIOS IN

THE FIELD.

EVERYTHING IN BETWEEN. THE TRANSMITTER SITES, RECEIVER SITES. TRANSMISSION SITES THAT CARRY THINGS BACK AND FORTH. THERE WAS NOT SPECIFICALLY MONEY CONTAPED IN THE BUDGET BUT FORTUNATELY FOR US, THEY OF A ALWAYS HAVE BEEN VERY GOOD ABOUT CONSIDERING OUR NEEDS SHOULD BE ABLE TO JUMP ON WITH EXPANSION. MANY OF THE SITES WHEN THEY BUILD CAPACITY THEY MAKE SURE THERE'S ENOUGH HE CAN SAYS CAPACITY, POWER NEEDS, WHICH IS DONE AS THEY'RE BUILDING SITES OUT VERSUS PURCHASING EQUIPMENT FOR US THAT HAS BEEN ON US. SAME AS FIRE OR PARKS OR SCHOOLS. FUNDING FOR THAT IS DAR ARE --HAS BEEN THROUGH CAPITAL FOR THEM. THAT IS GOING TO BE IN THE BUDGET BECAUSE BASICALLY GIVEN TASK OF TRYING TO ENTERTAIN WHAT THE NEEDS ARE FOR ALL THE AGENCIES. AT LEAST FOUR YEARS NOW WE'VE TURNED IN CALL TALL BUDGET **REQUESTS FOR OUR RADIO** INFRASTRUCTURE ENHANCEMENTS, **REPLACEMENTS TO GET ON BOARD** WITH THIS NEW TECHNOLOGY THAT IS COMING UP TO GO DIGITAL WHICH WILL HELP US. BECAUSE WE DID SUFFER A BIT WHEN WE WERE FORCED TO DO A FEW YEARS AGO WHEN FCC REQUIRED US TO DO IT. WE HAVE BEEN TRYING TO DO STABILIZATION. LAST TWO YEARS WITH THE CAPITAL BUDGET REQUEST THAT WAS FUNDED THROUGH CAPITAL WAS SOME MONEY TO DO A STUDY, NEEDS ASSESSMENT, O, HIRE CONTRACTOR TO COME IN EVALUATE ALL OF THE REOUEST FOR ALL OF THESE AGENCIES. SO THAT 15 DEPARTMENTS DON'T COME IN WITH MULTI-MILLION DOLLAR REQUESTS TO SEE WHERE THERE BE COST SAVING, EFFICIENCY, COLOCATING, GOING

TOGETHER.

THAT IS SOMETHING WE'VE ALWAYS SUPPORTED.

>> FOR A STAGE MORE OR LESS THE STUDY.

>> WHAT WE'RE TRYING TO DO IS ACCELERATE THAT.

-- I WOULDN'T SAY THREATS BUT DOWNSIDE IF WE DON'T MOVE QUICKER.

THE BPD THIS YEAR IS INSTALLING THEIR NEW CORE, WHATEVER CORE IS.

WE OPERATE OFF THEIR UHF. WHICH ALLOWS US TO BASICALLY, WHETHER IT'S POLICE, COULD TOUCH SOME BUTTONS, TRANSFER THAT TO -- LISTEN TO POLICE, TALK TO THEM, WHATEVER, IDEA TO HAVE COMMUNICATIONS BE

INTEROPERATABLE MAKES IT VERY EASY TO DO THAT.

WE'D HAVE TO STAY ON THEIR UHF CORE WHICH MAKE LISTENING AND TALKING WITH THEM A FEW MORE STEPS INVOLVED TO MAKE THAT WORK.

IT WOULDN'T BE LIKE SWITCH ON THE FLY AVAILABLE.

THEY ARE NOT WILLING TO SPEND

DOLLARS TO MAINTAIN THEIR LEGACY SYSTEM WHICH WILL WORK ON THAT

WILL BE -- IN ORDER TO TAKE

ADVANTAGE IN THE VERY LEAST HAVE

TO SECURE NEW DISPATCH CONSOLES

FOR US UP IN OUR DISPATCH OPERATION WHICH IS COLOCATED

WITH THEM.

THAT IS PRIORITY NEED FOR US. THAT HAS BEEN ADDRESSED WE'VE BEEN SPEAKING WITH BUDGET ON THAT.

I KNOW THAT THE BPD ONE OF THEIR RADIO -- HAS BEEN WORKING OUT A LOT TO HELP FACILITATE THAT WITH US AS WELL AS -- WE RECENTLY DURING INITIATIVE WITH LOT OF HARD WORK SUPPORT FOR BPD AND FIRE WAS PARTNERS IN THE REGION ABLE TO SECURE COMMITMENT FROM -- WHICH IS GRANT FUNDED PROGRAM THAT BOSTON HOSTS. THEY WERE ABLE TO SECURE FUNDING TO APPROXIMATELY LIKE \$1.3 MILLION TO REPLACE THAT AND UPDATE THAT EQUIPMENT. THAT PORTION OF -- THAT MONEY WON'T BECOME AVAILABLE UNTIL AFTER JANUARY SOME TIME. WE DO BELIEVE THERE WOULD SOMEBODY -- OUT OF THAT \$12 MILLION IS AVAILABLE THERE, STARTING IN JULY. LIKE -- OUR GOAL IS TO HAVE ACTUAL PLAN, NOT JUST SAY LIKE -- GIVE ME 12, LIKE, NO. THIS IS WHAT THIS IS GOING TO BUY YOU THIS YEAR. THIS IS WHAT IS GOING TO FIX OUR NEEDS. MEET OUR GOAL FOR YEAR ONE HOPEFULLY WE CAN HAVE OUR TRANSITION COMPLETE IN TWO, MAYBE THREE YEARS, TWO WOULD BE NICER. THE BPD ARE COMING UP GOING INTO YEAR FIVE. THERE ARE EFFICIENCIES ABLE, IF WE DO WORK WITH THEM ABOUT 70% OF OUR SITES WERE ALREADY COLOCATED WITH THEM OR CLOSE ENOUGH TO THEM. WE RECENTLY ABLE TO START TRANSMITTING FROM THE TOP OF BELLEVUE HILL IN ROXBURY HELPS A LOT OF US. THAT'S BECAUSE OF BPD. JUST REBUILT THEIR SITE UP THERE. THEY PUT IN EXTRA SPACE, EXTRA COOLING, EXTRA POWER, NEW GENERATOR THAT WOULD SUPPORT OUR EOUIPMENT. AGAIN, THEY DIDN'T PROCURE BUT WE HAD THAT EQUIPMENT IEP THOUGH IT'S THE OLDER STUFF. WE'RE ABLE TO INSTALL IT. THERE WAS SOME COST SAVINGS ABLE TO JUMP ON WITH THEM. COST SAVINGS IS THERE, TOO, WITH PROJECT MANAGEMENT JUST ADDING IT TO THEIR'S. CERTAINLY LESS EXPENSIVE THAN HAVING TO RECREATE. >> COUNCILOR ESSAIBI-GEORGE? >> THANK YOU. CHAIR. THANK YOU CHIEF OTHERS FOR BEING HERE I JUST WANTED TO ASK COUPLE FOLLOW

UP QUESTIONS IF YOU DON'T MIND SHARING SOME OF THE DATA AROUND THE COMMUNITY ASSISTANCE TEAM THAT SPARKED -- DASH SQUAD 80. DO YOU HAVE THE NUMBER OF INTERACTIONS THAT THEY HAVE HAD, WHAT SORT OF THE TYPICAL ASSISTANCE HAS BEEN THROUGH THAT SQUAD? >> YOU CAN ANSWER. THAT'S FINE. >> WHEN YOU LOOK AT THE NUMBERS **ABOUT 46 INTERACTIONS THAT WOULD** BE THE RESPONSES WHERE THEY ARE ADDED TO A CALL. **46 INTERACTIONS PER WEEK.** THEY -- I THINK CHIEF SAID THERE'S ABOUT 1,000 REFERRALS THOSE ARE PRINCIPALLY TO SHELTERS AND RECOVERY SERVICES. I THINK IT WAS AROUND 700 **REFERRALS TO SHELTERS.** AS WELL THEY DO ASSIST WITH PROVIDING BLANKETS AND OTHER **RESOURCES AS THEY HAVE** AVAILABLE. >> IS THERE ANY TRANSPORT TO ANY **OF OUR SHELTERS?** >> THEY WILL TRY TO ARRANGE WITH THE VANS BUT CERTAINLY REALLY COLD WEATHER AND STUFF THEY CAN DO THAT. WE PRETTY MUCH TRY TO KEEP THEM AVAILABLE ON SCENE UTILIZE SOME OF THE OTHER ONES, SERVICES THAT ARE OUT THERE. IN A LOT OF CASES SUCH AS ENGAGEMENT CENTER SOMETIMES IT'S CLOSE ENOUGH TO EVEN JUST -- OR MAYBE ALBANY WE CAN -->> OKAY, GREAT. >> EMS IS WHO DID THE PICK UP NOW WE HAVE MOBILE INSTEAD OF THE OUTREACH THAT'S REALLY GREAT. ARE YOU -- IS EMS STILL PICKING UP NEEDLES FROM ANY SITES **IMPROPERLY DISCARDED NEEDLES?** >> ON OCCASIONS WE STILL GET CALLS THAT COME IN FROM 311 TO DISPATCH, USUALLY IT'S MORE OFF HOURS. **REALLY DEPENDS -- EITHER** SUPERVISOR OR NEARBY UNIT TO

TAKE A LOOK IF IT'S SOMEBODY FINDS SOMETHING IN A PLAY GROUND, IN A COMMON HALLWAY, IN A BUILDING WHERE KIDS AND STUFF WE WANT TO MAKE SURE WE GET RID OF THAT.

MAY GO UP LOOK SAY LIKE, WOW, LIKE THOUSANDS THAT GET DISCARDED, CLEARLY SOMETHING ELSE FOR TEAM OF SOMEBODY WHO IS MORE EQUIPPED FOR THAT. >> HOW DO YOU DISPOSE OF THEM IF YOU ARE PICKING UP THAT WAY? >> ALL OF OUR UNITS HAVE NEEDLE BOX, I HAVE ONE IN MY CAR AND STUFF AND IF I HEAR ONE GO OUT I JUST GRAB --

>> ARE YOU ABLE TO TRACK THAT, BECAUSE WE ARE TRYING TO GET A BETTER UNDERSTANDING OF THE AMOUNT OF NEEDLE, IS THAT WE'RE COLLECTING AS A CITY. MOST RECENT NUMBER I'VE HEARD AS A CITY THROUGH VARIOUS DEPARTMENTS THAT WE'RE COLLECTING ABOUT 600,000 A YEAR? JUST WONDERING YOUR INFORMATION IS INCLUDED IN THAT? >> WE CAN CERTAINLY DO QUICK LOOK AT OUR CAD SEARCH FOR THAT

KIND OF CALL. AGAIN, MORE FOR ASSISTANCE, IT WOULDN'T GO TO EMS CALL BUT WE COULD LOOK AT THAT, THAT MAY NOT TELL US WHETHER WE PICKED UP ONE THAT WAS LOCATED NEAR LIED AND PLAYGROUND VERSUS -->> I DOVE LOVE THAT YOU DO COMMUNITY SERVICE PROGRAM OR OUTREACH PROGRAMS WITH THE EMT COURSE ALL OF THAT. THE COMMUNITY CPR TRAINING HOW MANY INDIVIDUALS DO WE TRAIN A YEAR?

YOU CAN TELL US. >> LAST YEAR IN 2018 WE HAD ABOUT 3300 CPR, THAT INCLUDES BOTH CPR CERTIFICATIONS AND HANDS-ONLY. >> WHERE ARE THOSE HAPPENING? THE TRAININGS? MOSTLY HAPPENING AT HEADQUARTERS OR -- >> GREAT COMMUNITY OFFICERS. >> THAT MIGHT REQUIRE CERTIFICATION. >> THANK YOU. >> THAT IS IT FOR ME, THANK. >> COUNCILOR FLAHERTY. >> THANK YOU, MR. CHAIRMAN GOOD TO SEE THE CHIEF. IT SEEMS PUNITIVE SEEING YOU THREE TIMES YOU'VE BEEN IN THE WELL HERE LAST TWO WEEKS, BUT ALWAYS GOOD TO SEE YOU, AN **OPPORTUNITY FOR US TO COMMEND** YOU FOR THE GREAT WORK OF YOUR ENTIRE TEAM OF EMS DOES ON BEHALF OF THE CITY, CAN SPEAK TO THAT PERSONALLY. WITH TIME AND ATTENTION BEEN SPENT ON CARING FOR MY FAMILY BUT FOLKS ACROSS THE CITY I'VE OFTEN SAID IF IT WASN'T FOR EMS, THAT THE DEATH TOTAL WITH BE SIGNIFICANT HIGHER POSSIBLY EVEN DOUBLE BUT FOR THE FACT THAT YOU **GUYS ARE THERE IN VERY SHORT** PERIOD OF TIME. ONE OF THE BEST TRAUMA HOSPITALS IN THE WORLD. THAT SAID, WAS CURIOUS TO SEE IS THERE MANDATORY RETIREMENT FOR EMS I KNOW YOU FALL UNDER BBPS. AND DO EMS, I KNOW EFFORTS THAT I LED HERE IN THE COUNCIL TO GET YOUR MEMBERS GROUP FOUR BUT I'M NOT RECALLING AS TO WHETHER OR NOT THERE WAS MANDATORY TRIGGER FOR RETIREMENT? >> THAT WAS NOT INCLUDED IN THE LEGISLATION THAT WAS PASSED TO INCLUDE THAT THIS PARTICULAR AGENCY. WHERE I DO SEE IT IN POLICE AND FIRE JUST FOR ONE REASON OR ANOTHER IT WASN'T THERE. >> ONE OF THE ISSUES THAT WE HAVE, CHIEF, WITH RESPECT TO THE POLICE IS THAT THERE'S A LARGE NUMBER OF FOLKS APPROACHING AGE 65. ONE OF THE CONCERNS I WOULD HAVE IS, WANT TO GET A SENSE AS TO THE -- SORT OF THE STATE OF EMS WORKFORCE AND HOW MANY WILL BE

RETIRING IN THE NEXT YEAR AND HOW MANY RETIRING IN THE NEXT

FIVE YEARS.

THAT'S IMPORTANT FOR US TO KNOW AS LEGISLATIVE BRANCH TO MAKE SURE THAT WE'RE FUNDING THE APPROPRIATE NUMBER OF RECRUITS AND CLASSES FOR YOUR WORKFORCE. I DON'T KNOW IF OFF THE TOP OF YOUR HEAD YOU CAN SURMISE AS TO HOW MANY RETIREMENTS YOU EXPECT THIS YEAR AND NEXT YEAR AS WELL AS WITHIN FIVE YEARS. >> TOP OF MY HEAD IT WOULD BE DIFFICULT. PROBABLY WOULDN'T TAKE US TOO MUCH TO LOOK AT PEOPLE WHO WOULD **BE RETIRING ELIGIBLE.** SAY, FOR EXAMPLE, IF YOU'RE --ASSUMING THAT -- CALCULATE, YOU HAVE TO BE AT LEAST 55 AND 3 YEARS, RIGHT? WE CAN LOOK TO SEE HOW MANY PEOPLE WOULD BE ELIGIBLE FOR THAT. LOT OF PEOPLE DO STAY PAST 55. SOME PEOPLE GO -- COUPLE OF **RETIREES WE HAD LAST YEAR** WEREN'T QUITE THERE, TWO OR THREE YEARS AWAY BUT THEY HAD OTHER EMPLOYMENT OPPORTUNITIES OUT THERE WHERE THEY HAD SOME OFFERS. DID MATH ON THEIR OWN. I'LL MAKE COUPLE OF PERCENTAGE POINTS LESS BUT THIS OTHER **OPPORTUNITY WON'T BE THERE IF I** WAIT THREE YEARS. SOME PEOPLE DO JUMP. SOMETIMES IT'S CAREER MOVE. >> KEEP YOUR EYE ON THAT BUT ALSO SORT OF THE NUMBER OF **RETIREMENTS THAT ARE BEING** FORECAST MAKE SURE WE'RE GIVEN APPROPRIATE ATTENTION TO THE **RESOURCES FOR THE BACKFILL, IF** YOU WILL OR AT LEAST TO KEEP UP WITH RETENTION. THE FIRE DEPARTMENT WAS IN THE OTHER DAY WHO ALSO DO GOOD WORK ON BEHALF OUR CITY TALKING ABOUT THEIR RESPONSE TIMES DESPITE THE FACT THAT THEY'RE SOLD ID, THEY ARE SEEING BETWEEN INCREASED TRAFFIC AND CONSTRUCTION, DENSITY THAT WE'RE EXPERIENCING, I KNOW THAT WE HAD TOUCHED LAST

WEEK WHEN YOU WERE IN, PARTICULARLY PERTAINS TO THE WATERFRONT. HAVE YOU SEEN ANY RESPONSE TIMES WITH EMS IN THE TRAFFIC WOE, IS THAT WE EXPERIENCE AS A CITY? >> WELL, I THINK TRAFFIC DOES PLAY A PART OF IT. I THINK RESPONDING TO -- YOU **REALLY HIT SOMETHING THAT'S --**TUNNEL CLOSED REAL OBSTRUCTION. FOR THE MOST PART, PRETTY ADEPT AT EMERGENCY VEHICLE WHEN IT COMES TO LIGHTS AND SIREN TRYING TO GET YOUR WAY THROUGH TRAFFIC OR MAKE A HOLE. THEY'RE PRETTY GOOD AS FAR AS EVEN TRYING TO -- VERY ADEPT TO FINDING AT ROUTES TO GET TO PLAYS. BECAUSE THEY LEARN QUICKLY HERE THAT -- I THINK ONE OF THE THINGS THAT PERHAPS WE DON'T ALWAYS CONSIDER -- WHEN YOU ARE NOW CLEAR TRYING TO GET BACK TO YOUR AREA THAT IMPACT TRAFFIC PLAYS ON THAT, TRYING TO GET BACK, FOR EXAMPLE, MASS GENERAL AND RUSH HOUR TRAFFIC TRYING TO GO BACK TO EAST BOSTON. IF YOU'RE NOT ON CALL YOU'RE NOT GOING TO ACTIVATE YOUR WARNING LIGHTS AND SIREN TO GO BACK. BUT IT MAY TAKE YOU A LITTLE BIT TO GET BACK OR GOING BACK TO HYDE PARK OR SOMEWHERE ELSE BUT TRAVELING JUST LIKE YOU GOING OUT, BACK TO COMMUNITY MEETING OR SOMETHING IN HYDE PARK THAT TIME OF DAY YOU HAVE TO ACCOUNT FOR TRAFFIC. IT'S PROBABLY A FACTOR. >> HOW MANY UNIFORMED EMS PERSONNEL DO WE HAVE ON SHIFT SORT OF EVERY HOUR OF EVERY DAY, OPTIMUM NUMBER THAT WE HAVE PROTECTING OUR CITY, MORNING, DAY AND NIGHT? >> AS FAR AS WHO IS UP -- DO THIS REAL QUICK HERE. >> ASSUMING THAT WE'RE AT BASE ON THE DAY SHIFT TODAY WITH 21 BLS AMBULANCES THAT SHOULD BE 42 EMTs, FIVE ALS UNITS ON,

TEN MEDICS, TWO OR THREE SUPERVISORS DEPENDING WHAT IS GOING ON PLUS THE SHIFT COMMANDER. WE HAVE COUPLE OF SPECIAL **OPERATIONS UNITS ON AS WELL.** TOO, ON DAYS. 52 -- SO, MAYBE ABOUT JUST SHY OF 60 PERSONNEL. IN DISPATCH OPERATIONS WE DO ADDITIONAL ON DAY SHIFT PROBABLY LIKE ADDITIONAL NINE PERSONS UP THERE BETWEEN SUPERVISORS, CALL TAKERS, DISPATCHERS, CAN ADD THAT ON THERE AS WELL. >> WITH THAT POPULATION EXPANDING THAT WOULD MOVE UPWARD PROJECTOR REAS YOU'RE CALCULATING AS THE BUILDINGS ON THE WATERFRONT, ALL THE CONSTRUCTION CRANES. >> CORRECT. WHEN WE GET THIS RECRUIT CLASS THROUGH NOW AND WITH THE OTHER ONES WE'RE TRYING TO TAKE ADVANTAGE OF THE EXPANSION THAT YOU AND MAYOR GAVE US WITH THE 20. WE'D BE ABLE TO DEPLOY ANOTHER TRUCK OR TWO ON DAYS OR EVENINGS ONCE WE DO GET TO THAT. >> EXCELLENT, CHIEF, THANK YOU FOR YOUR TIME AND ATTENTION. AGAIN, YOUR DEPARTMENT DOES PHENOMENAL JOB, ADDS TREMENDOUS VALUE WE ARE HAPPY TO HAVE YOU GUYS. >> THANK YOU. >> THANK YOU, MR. CHAIR. >> COUNCILOR FLYNN. >> THANK YOU, COUNCILOR CIOMMO. THANK YOU TO CHIEF FOR BEING HERE AND MORE IMPORTANTLY THANK YOU FOR YOUR EXCELLENT LEADERSHIP THAT YOU'VE PROVIDED THE CITY FOR SO MANY YEARS. CHIEF, I JUST WANT TO FOLLOW UP ON A COUPLE OF ISSUES THAT COUNCILOR FLAHERTY TALKED ABOUT. I KNOW WE SPOKE ABOUT IT RECENTLY. BUT THE SOUTH BOSTON WATERFRONT POPULATION CONTINUES TO GROW EVERY YEAR. WE DON'T HAVE A POLICE PRESENCE

DOWN THERE OR FIRE PRESENCE OR EMS. WE DID TALK RECENTLY TO THE FIRE COMMISSIONER AND HE WAS TALKING ABOUT THAT THE TRAFFIC THAT HE IS EXPERIENCING. A LITTLE MORE TIME. FOR FIRE TRUCKS TO GET INTO THE SEAPORT. I KNOW YOU HIT ON IT AS WELL. BUT I THINK IT'S REALLY CRITICAL FOR RESIDENTS OF THE SOUTH BOSTON WATERFRONT TO HAVE NEW EMS STATION. I HOPE WE CONTINUE TO WORK ON SHORT-TERM STRATEGY AND ALSO LENG-TERM STRATEGY EVENTUALLY GETTING EMS PRESENCE IN THE SOUTH BOSTON WATERFRONT. >> THANK YOU, COUNCILOR. THAT HAS BEEN PRIORITY, ONE OF THE PRIORITY FOR US GOING BACK TEN YEARS AGO. WE'VE HAD THAT IN OUR REQUESTS, WE PUT OUR NEEDS EVERY YEAR. YOU'RE CORRECT, THE CAPITAL BUDGET COUPLE OF YEARS AGO DID INCLUDE MONEY FOR A STUDY DOWN THERE. AND THAT STUDY WAS COMPLETED, LOOK AT SOME OF THE NEEDS, IT DID MAKE COUPLE OF DIFFERENT **RECOMMENDATIONS.** ONE WAS FOR THE CITY SITE TO BUILD WHERE WE COULD HAVE STAND ALONE OR SHARED FACILITY WITH SOMEBODY ON CITY OWNED PROPERTY. WITH ABILITY TO POLICE OR ABILITY TO GET OUR LINKAGE-TYPE PROGRAM WOULD BE ABLE TO GO IN WITH ANOTHER DEVELOPMENT GOING DOWN THERE, WHETHER IT'S ANOTHER STATE AGENCY OR PRIVATE DEVELOPER. WE COULD PUT IN AGAIN, WHETHER **IT -- THEY GAVE SOME EXAMPLES IN** THE DOCUMENT THEY DID WHERE SOME CITIES WHERE THEY WOULD HAVE EVEN FIRE ENGINE COMPANY IN THE CORNER OF A BUILDING THAT HAS RESTAURANT ON ONE END AND CONDOMINIUMS UP TOP, SOME CITIES DO THAT. THAT IS ONE OPTION.

LOOKING AT ANOTHER OPTION EXPLORING SOME OF THE CITY OWNED PARCELS. THE BPDA RECENTLY DID MAKE US AWARE THAT I THINK IT WAS 330 DRY DOCK AVE. A SMALL PARCEL. BUT IT IS OWNED BY THE CITY AND I DON'T THINK THERE'S ANY THOUGHT FOR THAT BEING EITHER SOLD TO A DEVELOPER, PRINCIPALLY PROBABLY BECAUSE IT IS SMALL ENOUGH, PROBABLY WASN'T THAT DESIRABLE THAT DRY DOCK RIGHT **BEHIND IT.** THEY DID PROPERTY CONSTRUCTION ASSESSMENT, SOMETHING THAT COULD BE USED FOR AT LEAST SINGLE BAY STATION IF IT WAS DONE RIGHT. THEY DID PUT -- THIS JULY, 300,000 AND CHANGE MADE AVAILABLE TO DO A STUDY. IS GOOD. HAVING A SITE IS REALLY KEY. IT'S VERY DIFFICULT TO FIND PROPERTY ANYWHERE. **BOSTON IS BOOMING, REAL** ESTATE-WISE. BUT FIND SOMETHING THAT IS DOWN THERE THAT THEY COULD USE AND BUILD ON. I'M ENCOURAGED THAT THERE IS A SITE AND THERE IS MONEY COMMITTED TO ACTUALLY DO DESIGN. BECAUSE THEN THINGS COULD FLOW AFTER THAT. THE GARAGE, STORAGE FACILITY THAT WAS BUILT OUT IN MAD --MADAPAN ON RIVER STREET, PUBLIC HEALTH WAS ABLE TO IDENTIFY A SITE ON EXISTING PROPERTY WAS A MAJOR HURDLE BECAUSE THEY HAD LOOKED AROUND AT ABANDONED OR SOON TO BE ABANDONED AUTO BODY SHOPS, TRYING TO FIND A SITE THAT THE CITY COULD MAYBE COME IN AND GRAB. HAVING THAT SITE HELPS A LOT BECAUSE THAT FACILITATED THE DESIGN. DID SAVE SOME MONEY ON THAT. SO THAT WAS LIKE A THREE-PHASE PROJECT WHERE WITHIN THREE YEARS FROM CONCEPTION TO WHERE WE WERE ACTUALLY ABLE TO MOVE IN, THAT

ONE MOVED QUICK. BY CAPITAL FUNDING TIMELINES I'M HOPING THAT WILL FOLLOW SUIT. >> GREAT WORK. JUST AS POINT OF REFERENCE, BRIAN GOLDEN, THE BPDA DIRECTOR WAS HERE YESTERDAY TESTIFYING AND WE WERE TALKING ABOUT THE GROWING POPULATION IN THE SOUTH BOSTON WATERFRONT AND BRIAN AND SOME OF THE EXPERTS ON THE BPDA ACKNOWLEDGED THAT THE POPULATION IS GOING TO GROW DOUBLE IN THE NEXT TEN YEARS. AND I SAID, THAT'S REALLY ANOTHER REASON WHY WE DESPERATELY NEED AN EMS STATION DOWN THERE, FIRE STATION. I LOVE THE BUILDING THEY BUILT IN THE MID '80S THE INTERNATIONAL PLACE BUILDING WHERE THEY HAD THE FIREHOUSE AND EMS STATION. THEN THEY BUILT SKYSCRAPER ABOVE IT, THAT MODEL SEEMS TO WORK. >> COLLEAGUES LOCATED AT 109. WHICH IS A LINKAGE PROJECT WITH MAYOR -- I THINK THE GUY'S NAME WAS FLYNN. >> I'VE HEARD OF HIM, CHIEF. >> WE HAVEN'T FORGOTTEN THAT. >> CHIEF, ONE MORE QUESTION IF I MAY. I KNOW HOW HARD YOUR EMPLOYEES WORK AND IT CAN BE A DIFFICULT JOB, IT CAN BE A STRESSFUL JOB. WHAT TYPE OF -- I KNOW A LOT OF THIS IS DONE FOR THE UNION. WHAT TYPE OF SERVICES ARE YOU ABLE TO PROVIDE YOUR WORKERS THAT ARE ON THE FRONT LINES THAT ARE CONSTANTLY DEALING WITH DIFFICULT SITUATIONS, TRAUMA SITUATIONS. ARE WE ABLE TO GET THEM THE RIGHT TIME OFF, ABLE TO GET THEM THE RIGHT ASSISTANCE FOR MEDICAL APPOINTMENTS OR COUNSELING OR FAMILY TIME OR ANY TYPE OF ASSISTANCE THAT WE CAN PROVIDE OUR FRONT LINE WORKERS THAT ARE ON THE STREETS EVERY NIGHT DOING VERY DIFFICULT JOB OF SAVING LIVES BUT LET'S -- I KNOW MUST

BE STRESSFUL FOR THOSE MEN RAND WOMEN.

>> CERTAINLY IS.

AND STRESS JUST -- WE ALL KNOW IS CUMULATIVE, THE AFFECTS OF IT.

YOU CAN HAVE A BAD DAY OR BAD NIGHT BUT IF YOU HAVE SERIES OF THEM OR YOU DON'T GET OVER ONE YOU ARE CARRYING BAGGAGE AROUND WITH YOU, WHETHER IT'S SOMETHING IN YOUR PERSONAL LIVES, FAMILY LIVES OR ON THE JOB, IT AFFECTS YOU.

PEOPLE ACROSS THIS CITY ARE CERTAINLY AFFLICTED WITH INVISIBLE WOUNDS THAT THEY CARRY AROUND.

AS FAR AS BOSTON EMS MANY YEARS AGO, IT WAS THE UNION, BACK WHEN WE WERE AFSCME, THE CO-WORKERS THAT OUR PEERS STARTED BUILDING UP A PEER SUPPORT TEAM, PEER SUPPORT UNIT, CONTRACTING, USING OUR UNION FUNDS AND STUFF TO HELP SECURE SERVICES OF PROFESSIONAL TO HELP SHAPE THAT, RUN DEBRIEFINGS, DO SOME FOLLOW UP.

OVER THE YEARS THAT GREW, THAT EXPANDED, THE DEPARTMENT NOW PAYS SIGNIFICANT FUNDS EVERY YEAR TO SECURE THE SERVICES. WE PUT OUT RFP WE CONTRACT WITH PROVIDER NOW THAT GIVES US ON SITE HERE LIKE IN THE FIRST FLOOR OF BUILDING WE'RE IN. WHERE CLINICIANS ARE AVAILABLE TO MEET WITH EMPLOYEES WHERE THEY CAN MAKE APPOINTMENTS DIRECTLY THROUGH THEM. I DON'T KNOW WHO IS GOING DOWN THERE OR WHO IS GETTING FOLLOWED UP THERE OR FOR WHATEVER REASON. THEY TRACK CONTACT HOURS THAT'S ALL.

THEY KNOW THAT THEY'RE PROVIDING THE SERVICES.

WHERE EMPLOYEES CAN COME IN AND REALLY NO OTHER -- WE DON'T UTILIZE ANY OF THE SPACE ON THE FIRST FLOOR, PEOPLE COMING AND GOING IS PRETTY LOW KEY. BUT THEY CAN MAKE ARRANGEMENTS TO MEET OFF SITE. WE HAVE -- THEY UTILIZE LICENSED CLINICIANS WHO ARE GOOD FOR THAT. THEY HAVE ANOTHER FACILITY WHICH IS -- CALL IT ON SITE BUT REALLY IT'S OFF SITE. IT'S OUTSIDE OF BOSTON. AND THEY ALSO HAVE THE ABILITY TO SEND PEOPLE TO THE PLACE, EVEN UP IN VERMONT OR OTHER ON ONES. WE HAVE A TEAM LEADER FOR PEER SUPPORT WHO IS CURRENTLY A LIEUTENANT WHO COORDINATES THOSE EFFORTS. AND HE IS A VEHICLE FOR WHICH --HE SERVES AS LIEUTENANT HERE, WHICH IS WEIRD, HIS ABILITY ON DIFFERENT SHIFTS, IT'S KIND OF BLEND IN THE BACKGROUND IF HE'S VISITING OR CHECKING IN WITH DIFFERENT PEOPLE AND STUFF IF THEY'RE AT WORK NOT SO OBVIOUS **BECAUSE IT'S -- RUN INTO** SUPERVISOR ON A SHIFT IT'S NOT LIKE, HERE COMES SO-AND-SO. WHAT ARE YOU SEEING HIM FOR? WE TRY TO MAINTAIN THAT CONFIDENTIALITY AND THAT LOW KEY APPROACH. BUT THEY ALSO -- THEY DO REFER PEOPLE OUT TO MEET WITH AGAIN LIKE I SAID THE LICENSED CLINICIANS. WE HAVE -- DO HAVE ABILITY TO PULL PEOPLE OFF LINE IF THEY REALLY THINK THEY NEED TO OR EVEN TO GO TO TAKE ADVANTAGE OF ONE OF THE PROGRAMS THAT THEY HAVE FOR PEER SUPPORT FOR STRESS. WHAT IS ALSO GOOD IS THAT, THE AGENCIES HELP EACH OTHER OUT. THE BPD, THE FIRE, SOMETIMES IF YOU HAVE LEARNED -- THEY LEARN OF A PROGRAM THAT MAY BE POLICE OR FIRE HAVE OR SOMETHING WHO MAY BE SUITED FOR SOMEBODY, THEY WILL HELP REFER, MAKE REFERRALS HELP EACH OTHER GET INTO PLACES OR I KNOW WE'VE TALKED BEFORE ABOUT VETERANS. THE HOME BASE PROGRAM, WE DO A

LOT OF TRAINING WITH THEM. THEY DID A LOT OF TRAINING FOR US, LOT OF PEOPLE TO RECOGNIZE DEALING WITH PTSD WHICH WAS GOOD FOR US IT HELPS YOU SEE YOURSELF BUT YOUR CO-WORKERS. BUT THEY WERE WITHOUT GETTING INTO IT, I DON'T KNOW WHO IT WA WAS, BUT WE HAD AN EMPLOYEE WHOSE SPOUSE WAS RETURNING VETERAN, HAD SOME ISSUES, WE WERE ABLE TO QUICKLY FACILITATE GETTING THAT PERSON HELP. THAT WASN'T OUR EMPLOYEE, BUT THAT AFFECTS OUR EMPLOYEE'S LIFE BECAUSE THEY NEED THAT HELP. A FAMILY DEALING WITH STRESSFUL SITUATIONS. THAT IS GOOD THING TO HAVE PARTNERSHIPS HAVING OUR PEER SUPPORT PEOPLE BEING ABLE TO TALK TO EACH OTHER WITH CONFIDENCE, THEY HELP SAY LIKE, WE SAW THIS BEFORE. I GOT JUST THE IDEA. A LOT GOES ON IN THE BACKGROUND AGAIN PRETTY MUCH GET SOME VERY GROSS NUMBER OF CONTACT HOURS. PEOPLE ARE LIVING UP TO DELIVERABLE. PARTITE HAVE TO DO SO MANY TRAININGS FOR OUR TEAMS, THEY HAVE TO DO FEW OTHER THINGS. MAKE SURE THAT THEY DO, WE HAVE -- BESIDES DEDICATED **OVERSEES GROUP OF VOLUNTEER PEER** SUPPORT PEOPLE WHO ALSO GET **RELEASE TIME TO TAKE TRAININGS** SO THAT GOOD CHANCE THEY ARE ON SHIFT. ALMOST EVERY SHIFT SOME PEOPLE OUT THERE WHO HAVE BEEN TRAINED TO RECOGNIZE AND DEAL WITH SOME OF THESE. THEY CAN MAKE THE CALL TO GET SOMEBODY IN OR GO TO THE SHIFT COMMANDER OR MEDIA OR ONE OF THE SUPERINTENDANTS. WE GOT TO GET ED OFF LINE FOR COUPLE OF DAYS. WE'LL DO IT, IS OUR ANSWER. >> THANK YOU, CHIEF. THANK YOU TO YOUR DEPARTMENT AND TEAM FOR GREAT WORK IN OUR CITY

AND OUR NEIGHBORHOODS AND YOU SAVING SO MANY LIVES. WANT TO SAY THANK YOU TO THE MEN AND WOMEN OF YOUR SEPTEMBER. >> THANK YOU FOR RECOGNIZING THE NEED TO TAKE CARE OF THEIR EMOTIONAL AND OTHER NEEDS, TOO, THANK YOU FOR MENTIONING IT. >> THANK YOU, COUNCILOR FLYNN. AT SOME POINT MAYBE AFTER THE HEARING IF YOU COULD PROVIDE THE NAME OF THE GENTLEMAN YOU SAID OR GENERAL TALL WOMAN WHO IS PARTICIPATING IN THE 911 AND RADIO. >> SURE. ABSOLUTELY. LIKE RIGHT NOW, FROM OUR SIDE I **GUESS IT'S -- FOR RADIO THING** IT'S BEEN MYSELF PUSHING IT, **OBVIOUSLY I'M NOT -- PROBABLY** ONE TRYING TO COORDINATE ACTIVITIES WITH CAPITAL AND WITH THE POLICE MAKE SURE THAT WE CAN MAKE SOME PROGRESS THIS FISCAL YEAR. I FELT WE WERE GOING TO GET AT LEAST A GOOD BITE OUT OF IT. BUT WE'D LIKE TO -- WANT TO OFFER LIKE PLAN TO SAY LIKE, HEY, THIS IS PROJECTED COST BUT ALSO PROJECTED COST SAVINGS IF WE DO IT NOW. I WILL GET YOU THAT. >> OBVIOUSLY HOPEFULLY **EVERYTHING LEADS TO BETTER RESPONSE TIMES, I LOOK FORWARD** TO SEEING THAT. JUST WANTED TO ASK A LITTLE BIT, I KNOW I PROBABLY SHOULD HAVE BROUGHT WITH UP. THE NORTH HAMPTON SQUARE PROJECT THAT WAS SUPPOSED TO PROVIDE SPACE FOR BPHC FITNESS CENTER. I BELIEVE, STOREFRONT. DOES ANYBODY HAVE ANY UPDATE ON THAT PROJECT? MAYBE IN PHASE TWO. BUT I SEE IN THE CAPITAL BUDGET THAT THERE'S LIKE 5.1 MILLION FOR THE MIRANDA CREAMER CENTER WHICH I THOUGHT WAS SUPPOSED TO **BE ON TRINITY -- WAS IT TRINITY** FINANCIAL?

WHOEVER THE DEVELOPER WAS. WAS SUPPOSED TO RENOVATE THAT ENTIRE BUILDING AND I'M JUST CONFUSED BECAUSE THAT PROJECT WAS APPROVED BY THE CITY COUNCIL IN 2013. NOW 2019. I KNOW THAT I THINK JUST THE EXISTING TOWER WAS RENOVATED AND MY UNDERSTANDING WAS THE MIRANDA CREAMER THAT HAS THE FITNESS CENTER WAS RENOVATED. WONDERING WHY WE'RE PUTTING MONEY INTO THE MIRANDA CENTER AT ALL. I GUESS IS THE QUESTION. >> I CAN ANSWER SOME OF THAT. MIRANDA BUILDING IS THE BUILDING THAT WE'RE CURRENTLY IN. OUR OFFICES ARE ON THE FIFTH FLOOR, WE HAVE OFFICES ON -- WE SHARE SPACE ON THE FOURTH FLOOR, OUR TRAINING DIVISION. AND WITH SOME OF THE PROGRAMS FROM PUBLIC HEALTH AS WELL AS ON THE SIXTH FLOOR WHERE THE MEDICAL INTELLIGENCE CENTER IS. WE HAVE TRAINING. WE HAVE TRAINING SIM LABS UP THERE, WE SHARE SPACE UP THERE WITH PUBLIC HEALTH PREPAREDNESS. A LOT OF OUR OPERATION IS ON THIRD FLOOR, WHERE OUR PROFESSIONAL STANDARDS DIVISION IS, WHERE -- ALSO OUR A&F, ADMINISTRATION AND FINANCE DOWN THERE, OUR I.T. SUPPORT ARE DOWN IN THAT LOCATION. I MENTIONED ON THE FIRST FLOOR THERE'S SOME SPACE WHERE WE HAVE STORAGE BUT ALSO HAVE OUR PEER SUPPORT OFFICES ARE DOWN THERE. WE'RE STILL VERY MUCH ACTIVE IN THAT BUILDING, SECOND FLOOR IS **PUBLIC SAFETY FOR -- PUBLIC** SAFETY DIVISION. WE UTILIZE THAT BUILDING HEAVILY. I THOUGHT SOME OF THE STUFF IN THE BUDGET FOR THIS YEAR. CAPITAL BUDGET FOR THAT WAS TO REPLACE THE ROOF ON THAT BUILDING AS WELL AS REPLACE ROOF ON SOUTH END FITNESS CENTER

WHICH IS ATTACHED LIKE A BRIDGE WITH US THAT GOES OVER THERE. WE USE -- UTILIZE THE -- SOME OF THE FITNESS FACILITIES FOR OUR RECRUIT TRAININGS AT TIMES. BUT FOR THE MOST PART WE'RE CONFINED TO MIRANDA KRAMER. THERE WAS, I KNOW, TALK, PLANS ABOUT EITHER TRINITY OR SOMEBODY ACQUIRING THE PROPERTY. LOT OF DISCUSSION ABOUT WHERE WE WOULD EVENTUALLY GO. THAT IS ON THE SHELF, SO I CAN'T -- I THINK BPD PROBABLY HAS MORE INFORMATION ON THIS AT THIS POINT STAGE OF THE DEVELOPMENT. I'M CHECK IN WITH THEM. I JUST WANT TO MAKE SURE THAT WHAT THE COUNCIL PASSED SIX YEARS AGO NOW, WAS FAVORABLE TO TRINITY, I THOUGHT AT THE TIME. BUT THEY MADE SOME COMMITMENTS TO THE CITY, PARTICULAR TO PMC BUT ALSO BHPC I JUST WANTED TO MAKE SURE EVEN WHEN I'M OUT THE DOOR THAT THEY FULFILLED THOSE COMMITMENTS TO THE CITY RESIDENTS. JUST ONE LAST QUESTION ON THE EMS QUESTION, IT'S AFFORDABLE --ONE OF YOUR INITIATIVES FOR CITY RESIDENTS TO GO ONLINE TO DO A TRAINING. ONLINE TRAINING OR SOMETHING. WHERE DID I SEE THAT. IN YOUR **INITIATIVES**? >> OUR EMT TRAINING BEING AFFORDABLE, DEPENDING WHAT YOUR BUDGET IS, AFFORDABLE IS ALWAYS A RELATIVE -- TO PROVIDE TRAINING IS \$850 TO TAKE OUR CLASS. MOST PLACES LIKE IF YOU GO TO A COMMUNITY COLLEGE, LOT OF THE OTHER PLACES IT'S AT LEAST DOUBLE THAT. IT'S CLEARLY THAT. OUR GOAL ALWAYS TO MAKE IT AFFORDABLE TO COVER OUR EXPENSES, BASICALLY OUR EX EXPENSES. WE HAVE A TRAINING CAPTAIN, LEAD INSTRUCTOR UP THERE BUT WE ALSO -- THE TRAINING ASSISTANTS

PRETTY MUCH GET A STIPEND WHICH IS JUST A FLAT RATE FOR HELPING OUT WITH THE CLASS TO TRY TO KEEP IT MORE AFFORDABLE. IT'S LESS OF A BARRIER FOR PEOPLE TO GET THEIR EMT CERTIFICATION TO COME TO THE CLASS.

>> WITH THE NEW DIVERSITY OFFICER, AND THE FUNDING THAT COMES WITH CITY ACADEMY I THINK THAT IS A PLACE THAT THAT PERSON SHOULD FOCUS ON, TOO, GETTING FOLKS FROM THE NEIGHBORHOOD, FROM THE CITY OF BOSTON THROUGH THE NEIGHBORHOOD JOBS TRUST BECAUSE THAT'S WHERE THAT FUNDING ACTUALLY COMES FROM FOR CITY ACADEMY, I BELIEVE. THAT MONEY COMES FROM ALL OF THE DEVELOPMENT YOU SEE IN THE CITY OF BOSTON.

SO WE SHOULD BE TAKING THOSE RESOURCES AND MAKING SURE OUR CITY OF BOSTON RESIDENTS -- JUST LASTLY, WHAT IS THE ENTRY LEVEL EMT/EMS EMPLOYEE COMING ON THE STREET WHAT IS THEIR STARTING SALARY?

>> EMT GRADUATED, 57. RECRUIT, ONE GRADE BELOW THAT. >> 57 PLUS THEIR OTHER STIPENDS. >> THANKS.

AS I FINISH, THIS IS ACTUALLY THE LAST WAYS AND MEANS HEARING FOR THIS SEASON.

BEFORE WE HAVE RESUBMITTAL AND SUCH BUT I'M GLAD WE ENDED WITH EMS, THE MEN AND WOMEN, THE TEAM BEHIND YOU, YOUR FOLKS, THE SUPPORTS IN THE GALLERY HERE. AGAIN MAKE US VERY PROUD I THINK YOU'VE HEARD FROM ALL OF MY COLLEAGUES.

WE'RE VERY PROUD OF EMS THE WORK YOU MEN AND WOMEN DO, ALL OF OUR PUBLIC SAFETY OFFICIALS I THINK WE ARE THE MODEL FOR THE WORLD QUITE FRANKLY, THE WAY WE APPROACH PUBLIC SAFETY. THE WAY -- THE RESULTS WE GET SO I JUST WANT TO THANK YOU. AGAIN, HAPPY EMS WEEK AND THIS HEARING IS ADJOURNED. >> THANK YOU, COUNCILOR.