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; 05/21/18 1:12 PM  
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;;;BOSTON CITY COUNCIL  
;;;11:00-1:00  
;;;05/21/2018  
TEST BCC 05/21/2018  
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>>> GOOD MORNING.D  
SV NAME IS MARKt( CIOMMO.  
I'M THE CHAIRMAN OF WAYS AND  
MEANS AND THE CITY COUNCILOR.  
TODAY IS MONDAY, MAY 21st.çó  
WE ARE HERE WITH OUR GOOD  
FRIENDS FROM EMERGENCY MEDICAL  
SERVICES.Ñiq  
AS PART OF THE BOSTONfáÑiçófá PUBLIC  
HEALTH DEPARTMENT FY'19 BUDGET T&  
LIKE TO WISH YOU A HAPPY EMS  
WEEK.t(  
IN fáADVANCE, AND REMIND FOLKS /SJ5Q2"jTHAT THIS IS A PUBLIC HEARING.  
IT IS BOTH BEING BROADCAST LIVE,  
ANDxD RECORDED ON RCNÑi 82, COMCAST  
8, VERIZONq  
BOSTON.GOV/CITY-COUNCIL-TV.o|]  
I ASK FOLKS IN THE CHAMBER TO  
SILENCE ALL ELECTRONIC DEVICES.Yfx5í  
AT THE CONCLUSION OF THE  
DEPARTMENT'S PRESENTATION AND  
QUESTIONS FROM MY COLLEAGUES WE  
WILL TAKE PUBLIC TESTIMONY.  
THERE IS SIGN-IN SHEETS TO MY  
LEFT BY THE DOOR.t(  
I ASK THAT YOU STATE YOURfá NAME,  
AFFILIATION, AND RESIDENCE,Ñi AND  
PLEASE CHECK THE BOX, IF YOU DO  
WISH TO TESTIFY.xDq  
WE ARE iBQ)E, AS I MENTIONED  
EARLIER, WITH OUR GOOD FRIENDS  
FROM BOSTON EMS AS ITf6|úe1 PERTAINS  
TO DOCKETS 0559 THROUGH 0563.ñr  
ORDERS FOR THEçó FISCAL YEAR '19  
OPERATING BUDGET, INCLUDI,oÑ  
ANNUALok APPROPRIATIONS FOR  
DEPARTMENTALt( OPERATIONS, ANNUAL  
APPROPRIATIONok FOR THE SCHOOLV  
DEPARTMENT, APPROPRIATION FOR  
OTHER POST EMPLOYMENT B/  
APPROPRIATION FOR CERTAIN  
TRANSPORTATION AND PUBLIC REALM  
S%  
FOR CERTAIN PARK IMPROVEMENTS,

AND DOCKETS 0564, AND 0565,  
CAPITAL BUDGET APPROPRIATION  
INCLUDING ORDERS AND LEASE AND  
PURCHASE AGREEMENTS.

I'D ALSO LIKE TO REMIND FOLKS  
THAT IN THE AUDIENCE THAT THERE  
FIRST,

PRESIDENT ANDREA CAMPBELL, AND  
TO MY LEFT, CITY COUNCILOR AT  
LARGE ANNISSA ESS  
CHIEF WELCOME AND YOU HAVE THE  
FLOOR.  
>> THANK YOU.

GOOD MORNING COUNCILOR.

AND PRESIDENT.  
AND OTHER MEMBERS OF THE KOUBS.  
THANK YOU VERY MUCH.

THANK YOU FOR RECOGNIZING EMS  
WEEK COUNCILOR CIOMMO.

SAND I ALSO WANT TO THANK THE  
BODY AGAIN FOR THE PROCLAMATION,  
AND THE MOMENT YOU GAVE US IN  
THIS CHAMBER A WEEK AGO.

IT WAS MUCH APPRECIATED AND  
AGAIN WE NEVER TAKE THAT FOR  
GRANTED.

IT'S ALWAYS -- IT'S A GREAT  
OPPORTUNITY  
DISTRIBUTED SOME PACKETS TO  
WITH INFORMATION  
BUT, ONE OF THE THINGS, AND WE  
HAVE A SLIGHT SMALL SLIDE  
P

OPENING REMARKS.  
SO, ON THE FIRST PAGE, I DO  
REFER TO THE 44th ANNUAL  
NATIONAL EMS WEEK THING, AND IN  
THERE, THERE IS A LIST OF EVENTS  
THAT YOU CAN TAKE A LOOK AT.  
JUST POINT OUT THAT TOMORROW,  
TUESDAY, CITY HALL PLAZA WE WILL  
HAVE SOME PERSONNEL OUT HERE  
FROM 10:30 TO 1:30 WITH SOME  
DEMONSTRATIONS, SOME MATERIAL,  
SOME EQUIPMENT, SO IT'S A SHORT  
WALK, IF YOU'RE AVAILABLE  
SO JUST A QUICK OVERVIEW.  
I THINK -- SO EVERYBODY HERE  
KNOWS US PRETTY WELL.

I DON'T THINK WE  
COUNCILORS HERE TODAY WITH US,  
AND WE'RE GOING TO MAKE SOME  
TIME TO SIT DOWN WITH THEM  
INDIVIDUALLY AND TRY TO GIVE

THEM A BIT MORE ABOUT THE HISTORY OF THE DEPARTMENT AND WHERE WE'RE AT AND WHAT'S GOING ON, PARTICULARLY IN THEIR DISTRICTS.

BUT, RIGHT NOW, WE ARE -- WE ARE OF COURSE THE

BOSTON PUBLIC HEALTH COMMISSION. WE OFFER A TWO-TIERED SYSTEM. WE ARE FOR BASIC LIFE SUPPORT, AS WELL AS ADVANCED LIFE SUPPORT, AND A CALL TYPE IS WHAT DECIDES WHETHER YOU'RE GOING TO GET ONE OR BOTH TYPES OF AMBULANCES.

AND 2017 BOSTON EMS WE HAD A TOTAL CALL VOLUME OF 126,562 CLINICAL THAT RESULTED IN 555 ALS AND BLS AMBULANCE RESPONSES.

AS

MORE THAN ONE AMBULANCE TO A PARTICULAR CALL.

OR IF IT'S AN MVA THAT MAY HAVE SEVERAL AMBULANCES GOING.

THAT'S WHY YOU SEE MORE RESPONSES THAN INCIDENTS.

AND THAT RESULTED IN 86,023

TRANSPORTS TO BOSTON HOSPITALS.

WE'RE CURRENTLY BUDGETED FOR FULL TIME EMPLOYEES, AND 375 OF

WITH THE ADOPTION OF THE BUDGET THAT THE MAYOR IS SUBMITTED TO

YOU THIS YEAR, AND YOU KNOW

/1

INCREASE OUR FTE COUNT BY 20.

WHICH WILL THEN GIVE US 395

UNIFORMED EMTs AND PARAMEDICS

AND TOTAL FTE COUNT FOR THE

DEPARTMENT OF 420.

AND FIELD OPERATIONS, JUST A

QUICK OVERVIEW.

RIGHT NOW WE'RE OPERATING 21 BLST UNITS AND FIVE ALS UNITS FROM 16

STATIONS CITYWIDE DURING PEAK HOURS.

PEAK HOURS ARE LIKE NOW.

SO THAT'S MOSTLY THE DAY SHIFT

AND EVENING SHIFT.

AND OUR LOWEST BETWEEN 2:00 A.M.

AND 6:00 A.M. WE DROP DOWN TO 14 AMBULANCES COVERING THE CITY BECAUSE IT MAKES MORE SENSE FOR

US TO HAVE MORE AMBULANCES ON

2:00 IN THE AFTERNOON THAN SAY  
AT 2:00 IN THE MORNING JUST  
BASED ON HISTORICAL PRECEDENT  
AND NEED.

SEVERAL CREWS SHIFT CHANGE AT  
OUR STATION AND THEN THEY REPOST  
TO A MORE STRATEGIC LOCATION  
DETERMINED BY A CALL VOLUME.  
AND I SAY THAT BECAUSE EVEN  
CURRENTLY, WE DON'T  
26 STATIONS TO BASE THEM OUT OF.  
SO LOTS OF TIMES WE  
MOVE THEM  
AROUND TO DEPLOY THEM WHERE THEY  
NEED IT TO FILL GAPS IN  
COVERAGE.

DISPATCH OPERATIONS, WHICH IS  
UP  
AT ONE SHORTER PLAZA POLICE  
HEADQUARTERS WITH THE 911  
CENTER  
FOR THE CITY IS WE HAVE EMTs  
AND  
SUPERVISING (EMTs WHO ARE ALL  
BOSTON EMS ACADEMY TRAINED EMTs  
WHO MANY OF THEM WORKED IN THE  
FIELD.

SOME STILL DO ON OCCASION.  
THEY GO OUT, AS WELL.  
BUT ON TOP OF THAT THEY RECEIVE  
ADDITIONAL TRAINING, ADDITIONAL  
CERTIFICATION.

THEY ALL WENT TO AN EMERGENCY  
MEDICAL DISPATCHER TRAIN, WHICH  
IS WHAT TEACHES THEM TO USE THE  
MEDICAL GUIDE CARDS TO GIVE  
DETAILED PREARRIVAL  
INSTRUCTIONS, AND TO PICK THE  
BEST RESOURCE TO SEND TO THE  
CALLS, AND TO PRIORITYZE.  
BECAUSE, AS MUCH AS WE'RE  
STAFFED OUT, THERE ARE TIMES  
WHEN WE HAVE TO PRIORITYZE  
CALLS, AND TRIAGE THEM TO SEE  
WHICH ONES TO GIVE OUT FIRST  
CMEC WHICH IS OUR COORDINATING  
CENTER FOR THE REGION FOR THE  
CITIES AND TOWNS AROUND BOSTON  
IS FOR MANAGING EITHER MASS  
CASUALTIES, BUT ALSO FOR  
PROVIDING PATCHES, RADIO  
MEDICAL DIRECTION AND FOR ENTRY  
NOTIFICATION.

NEXT DIVISION OUR DEPARTMENT IS  
RESEARCH TRAINING, AND QUALITY  
IMPROV  
TRAINING ACADEMY CREDITED BY THE  
COMMONWEALTH.

IT PROVIDES CONTINUING EDUCATION FOR ALL UNIFORMED PERSONNEL. ALL MEMBERS OF THE DEPARTMENT ARE ASSIGNED ROUTINELY TO TRAINING SEVERAL TIMES A YEAR TO GET RECENT UPDATES, AND REFRESH TRAINING, AND DIFFERENT TECHNIQUES.

IT COULD BE NEW COMMISSION POLICIES, ( ANYTHING THAT WE HAVE TO GO OVER, WE'LL DO THAT BY SCHEDULING BY BRINGING PEOPLE IN.

WE DO SHIFTS.

IF YOU WORK THE NIGHT SHIFT, YOU HAVE A WEEK TO TRAIN AND YOU GO TO TRAINING THERE.]

THAT WAY WE HAVE THOSE PEOPLE AVAILABLE.

IF WE HAVE TO PULL THEM OUT, ON OCCASION, SOMETIMES WITH SOME OF THE STORMS, WE'VE HAD THIS PAST COUPLE OF WINTERS, WE MAY CANCEL TRAINING SO WE CAN GET EXTRA UNITS OUT IN THE FIELD.

THAT'S WHY IT'S WISE FOR US TO TRAIN ON ALL THREE SHIFTS.

WE HAVE A RIGOROUS SIX-MONTH TRAINING PROGRAM FOR OUR NEW EMTS.

WE ARE IN THE PROCESS, AS I SIT HERE TODAY, WE'VE BEGUN INTERVIEWS FOR THE NEXT ARE YOU KRUT CLASS WHICH IS START SECOND WEEK OF JULY.

SO, WE DID OUR WRITTEN EXAM TWO WEEKS AGO, OUR PRACTICAL EXAM WAS YESTERDAY.

AND WE'RE REALLY TRYING TO MAKE SURE SO THAT WE CAN TAKE THE OPPORTUNITY TO GET THIS CLASS IN ONCE IT'S FUNDED FOR JULY. WE HAVE

WE'VE BEEN BUYING MORE STATE-OF-THE-ART EQUIPMENT WITH THE IDEA OF BEING ABLE TO ENHANCE OUR SKILLS AND JUST BE SAFER FOR PATIENTS IN THE FIELD. WE OFFER AN AFFORDABLE BASIC EMT COURSE WHICH IS OPEN TO THE PUBLIC.

WE OFFER TRAINING FACILITY AT A COST

THAT'S ABOUT HALF OF WHAT YOU'D  
PAY AT A COMMUNITY COLLEGE AND  
WE ONLY, EVEN AT THAT WE ONLY  
CHARGE ENOUGH TO COVER OUR  
EXPENSES, FOR THE M) & g & %  
STRUCTURE TIME UP THERE.  
THAT ONE CLASS, I] ñr WE'VE CONDUCTED  
FOR MANY YEARS NOW, HAS PROVEN I p  
TO BE OUR MOST EFFECTIVE TOOL  
FOR RECRUITING AND DEVELOPING  
TALENT FROM ñr BOSTON'S D  
NEIGHBORHOODS TO HELP US WITH  
DIVERSITY, e l L A N G U w ' C, RACE,  
ETHNICITY, A LOT OF ó [ ! PEOPLE WHO  
WORK HERE NOW HAVE COME THROUGH  
THAT CLASS, AND I'LL SPEAK MORE  
OUR SPECIAL OPERATIONS DIVISION, t ( @ & H C  
SUPPORTED t ( 786 SPECIAL EVENTS IN  
2017.

MANY OF THOSE EVENTS TOOK PLACE  
ON THIS PLAZA RIGHT OUT HERE.  
A LOT OF THE PARTIES, OR  
FESTIVALS, BUT ALSO THE LARGER  
ONES LIKE THE MARATHON OR FOURTH  
OF JUL I r CELEBRATION, TALL SHIPS.  
RIGHT DOWN TO ROAD r  
PARTIES, AND NEIGHBORHOODS,  
ELDERLY EVENTS.

OTHER THINGS THAT MAY REQUIRE AN  
EMS RESPONSE OR AN EMS STANDBY. ñ i x D ñ i  
AND THE COORDINATION OF THAT IS  
VERY IMPORTANT BECAUSE OTHERWISE  
AMBULANCES FROM THOSE EVENTS  
WOULD BE COMING FROM THE  
NEIGHBORHOODS i ] IF WE DIDN'T  
PREPLAN AND HAVE EFFECTIVE PLANS  
IN PLACE FOR T á ) 9 ñ  
WE'RE i ] GOING TO BE HAVING q  
THE STADIUM COMING UP THIS ç ó  
WEEKEND.

THAT WAS A PARTICULARLY BUSY  
EVENT FOR US LAST YEAR.  
WE WANT TO MAKE SURE THAT THAT'S  
COVERED SO o k WE'RE NOT DRAGGING  
RESOURCES OUT OF q  
AUSTIN TO BE SERVICING A PRIVATE  
VENUE.

WE ALSO PREPARED FOR SURGE  
EVENTS, INCLUDING THE KNOWN AND  
UNKNOWN, STOCKPILING AND ç ó  
NECESSARY ñ r SUPPLIES, ABILITY TO  
OPEN UP MEDICAL SHELTERS IF WE  
NEED TO SUPPORT OEM.  
AND WE HAVE -- WE CARRY A LARGE

SUPPLY OF ANTIDOTEÑiÑir  
POISONINGS, AND OTHER THINGS  
THAT DEPARTMENT OF HOMELAND  
SECURITY HAS PROVIDED US.e1t(  
WE DO5a! EXPENSIVE PLANNING AND  
COORDINATION WITH THEt( CITY,pG1 AND  
WITHe1 THE REGION, AND WHILE OUR  
TRAINING AND EXERCISES ARE USED  
TO PREPARE OUR PERSONNEL FOR ALL  
HAZARDS, AND I'LL GIVExD YOU AN  
EXAMPLE, BACK IN 2014 WITHçó THE  
CONCERN ABOUT EBOLA CASES COMINGTNmi"  
TRAINING FOR THAT, A LOT OF  
PRACTICING USING PROTECTIVE  
EQUIPMENT FOR US AND HOW TO  
PACKAGE, AND CARE FOR PATIENT;XW  
AND YOU KNOW, NOW WITH KEEPING  
AN EYE ON WHAT'S GOING ON IN THE  
CONGO, AND THE POTENTIAL THAT'S  
IT'S SPREAD TO MUNICIPAL AREAS  
THERE AND COMING OUT OF THE  
COUNTRYSIDE WE WANT TO MAKE SURE  
)@ WEjF HAVE TO DUST THOSE PLANS  
OFF WE'LL BE READY TO GO.  
THAT'S WHAT THAT AREA HANDLES.  
COMMUNITY INITIATIVES.çóçóñrñr  
PUBLIC SAFETY,i] LIFE SAVING  
SKILLçXLÑi EDUCATION, THEY  
PARTICIPATE IN COUNTLESS  
COMMUNITY EVENTS AND MEETINGS.  
WEi] REGULARLY SCHEDULE CAR SEAT  
CHECKS AND DO INSTALLATIONS.  
MANY OF THEM ATxD LOW COST OR NO  
COST TO PEOPLE QUALIFIED FOR  
THEM.  
WE DO THATtúJUT OFi] OUR GARAGE AT  
MATTAPAN AND PEOPLE CALL UP AND  
MAKE APPOINTMENTS.  
WE DO CPR TRAINING FOR  
BUSINESSES AND%  
WE DOT( SENIOR SAFETYlp  
PRESENTATIONS ON FILE OF LIFE  
AND OTHER PROGRAMS.  
AND I'LL GET TO THEt( IMPORTANT OF  
CPR TRAINING IN AN UPCOMING  
SLIDE.  
ANDfá OF COURSE WE AREMY! SUPPORT  
SERVICES DIVISION,t( \$9J IS OUR  
FLEET THATma|-9;q  
AMBULANCES AND OUR SUPERVISORY  
VEHICLES.  
OUR MATERIALS MANAGEMENT, WHICH  
IS OUR ANNUAL SUPPLY THAT WHERE  
WE ARExD ROLLING OUT A NEW

INVENTORY SYSTEM WHICH WILL MAKE  
US MORE EFFICIENT.  
ALMOST EVERYTHING WE PURCHASE IN  
EMS HAS AN EXPIRATION DATE. ( MEDICINES,  
EVEN BANDAGES, PLASTIC, OXYGEN MASKS,  
OR ANYTHING YOU PUT IN AN AMBULANCE HAS AN  
EXPIRATION DATE.  
SO MANAGING THAT WE DON'T HAVE ENOUGH  
ON HAND, BUT SO IT DOESN'T HAVE TO BE  
THROWN OUT YEAR, IS IMPORTANT.  
SO WE'RE REALLY TRYING TO SAVE MONEY  
AND MANAGE OUR COSTS THERE, AND THAT'S  
STARTING TO SHOW THROUGH BENEFITS FOR US.  
TECHNOLOGY SERVICES TAKE CARE OF OUR  
I.T. NEEDS. FACILITIES, OVERSEAS ALL OF  
OUR LOCATIONS. AND WE HAVE ADMINISTRATION  
AND FINANCE SUPPORT AT PUBLIC HEALTH  
COMMISSIONS. ALL ACCOMPLISHMENTS.  
JUST COME UP WITH A FEW. ONE I WAS  
GOING TO THE COMMUNITY ASSISTANCE TEAM.  
LAST YEAR, WHEN YOU APPROVED THE BUDGET,  
IT INCLUDED THE MAYOR'S REQUEST TO ADD  
FOUR EMT POSITIONS OF ADDITIONAL FTE  
STAFF THIS COMMUNITY ASSISTANCE TEAM,  
WHICH WAS DESIGNED TO GO OUT AND, IT'S  
A NAUNSZ TRANSPORT EMS VEHICLE TO HELP  
US MANAGE OUR CALL VOLUME. AS I SAID,  
CALL VOLUME STILL KEEPS RISING EVERY  
YEAR. OUR TRANSPORTS, SLIGHTLY LESS,  
SO. SO THAT MEANS WE'RE GETTING MORE  
CALLS FOR EVALUATIONS, PLUS STANDBY  
FOR PERSONS WHO MAY HAVE MENTAL  
ILLNESS OUT IN THE COMMUNITY, OR WHO  
MAY HAVE ISSUES AROUND HOMELESSNESS,  
OR QUITE FRANKLY, WE SEE MAYBE  
SUBSTANCE ABUSE PROBLEM, WE HAVE BEEN  
IN A FACILITY -- HOSPITAL, THEY  
BELIEVE, AND YOU ENCOUNTER THEM  
AGAIN, OR THREE TIMES IN A DAY.

AND THEY'RE REFUSING CARE. SO, THIS TEAM THAT WAS PUT TOGETHER IS COMPROMISED OF TWO EMTs, CURRENTLY RIGHT NOW ON THE DAY SHIFT THE PRIMARY AREA IS THE MASS AVE CORRIDOR WITH A LARGE PATIENT POPULATION THAT WE'RE SEEING THERE.

AND IN THE EVENING SHIFT WE SHIFT THEM MORE DOWNTOWN TO DEAL WITH CAMBRIDGE STREET HERE, THE COMMON, DOWNTOWN CROSSING, WHERE WE HAVE A HIGH PERCENTAGE OF CALLS THAT COME IN TO AN UNKNOWN EMS WHICH REQUIRES A PRIORITY ONE RESPONSE. BUT, THAT WINDS UP RESULTING IN MAYBE ONLY 15 -- I'M SORRY, 25% OF THOSE PATIENTS BEING TRANSPORTED TO HOSPITAL.

BECAUSE THEY'RE REALLY IN NEED OF OTHER SERVICES. SHELTER, REFERRAL FOR RECOVERY SERVICES SOME OF THEM ARE JUST TO STAY FOR THAT ONE NIGHT. AND SO WE MAKE -- EXCUSE ME. I'M JUST TRYING TO GIVE YOU A QUICK UPDATE ON HOW THAT'S BEEN GOING SO FAR.

SO, LOOKING AT SOME STATISTICS, THROUGHOUT OF THIS YEAR, WE STARTED ON OCTOBER 30TH. WE DIDN'T GET IT GOING RIGHT AWAY BECAUSE WE HAD TO HIRE PEOPLE AND GET THEM IN. ONCE WE DID THAT WE STARTED ON OCTOBER 30TH, AND THROUGHOUT 30TH, I BELIEVE THIS INFORMATION IS IN THERE.

NO, THIS ONE ISN'T. I JUST GOT THIS ONE THIS MORNING.

I APOLOGIZE.

THEY GOT OVER 1,000 CALLS, AND THEY WERE ABLE TO CANCEL AN ADVANCED LIFE SUPPORT, BASIC LIFE SUPPORT UNIT 29 TIMES, 187 TIMES THEY WERE ABLE TO FREE UP THE AMBULANCE, CANCEL AN AMBULANCE THAT WAS COMING TO A HIGHER OR LOWER LEVEL. THEY WERE ABLE TO ASSIST PERSONNEL 271 TIMES AND THEY WERE ABLE TO CANCEL USE FOR OTHER REASONS, PERHAPS TO

HELP WITH  
ELSE THAT DOESN'T REQUIRE AN  
AMBULANCE TRANSPORT.  
AND IT FREED UP THAT AMBULANCE  
TO DO OTHER CALLS.  
AND THEY MADE 317 REFERRALS TO  
EITHER RECOVERY SERVICES,  
ENGAGEMENT CENTER, SHELTERS, AND  
OTHER PROGRAMS.  
SO, OUR PERSONNEL FEEL THAT IT'S  
BEEN A BIT OF A SUCCESS, BECAUSE  
IT HAS BEEN ABLE TO DO THE  
INTENDED NEED WAS TO FREE UP OUR  
PERSONNEL FROM SOME CALLS, AND  
THEY'VE ALSO BEEN THE FIRST ON  
SCENE FOR CARDIAC ARREST.  
THEY'VE BEEN THE FIRST ON SCENE  
DOWN ON TEMPLE PLACE.  
SO THEY'RE STILL ABLE TO DO  
IMMEDIATE LIFE-SAVING CARE,  
WELL, UNTIL THE AMBULANCE GETS  
THERE, SO THEY'RE HIGHLY  
MOTIVATED, AND IT'S BEEN  
WELCOMED BY THE WORKFORCE.  
SO THANK YOU FOR THAT.  
ONE OF THE THINGS WE'VE BEEN  
TRYING TO DO IS IMPROVE OUR  
CARDIAC ARREST SURVIVAL RATE.  
AND I WAS JUST GOING TO FIT  
THIS -- THERE'S TWO GRAPHS HERE.  
UTSTEIN CRITERIA IS WHEN THEY  
IT'S WHEN A PERSON PRESENTS IN  
V-FIB WHICH IS  
AMENABLE TO TURNING THEM AROUND  
WHEN YOU SHOCK THEM WITH A  
DEFIBRILLATOR.  
WE'VE HAD SEVERAL JUST IN THIS  
BUILDING.  
SOMEBODY SPOTS SOMEBODY DOWN,  
THEY CALL 911, SOMEBODY STARTS  
COMPRESSIONS,  
GRAB A DFIB OFF THE WALL.  
THOSE LEAD THE MOST TO SUCCESS  
WHEN SOMEBODY FINISH YEATS CARE  
RIGHT AWAY.  
YOU KNOW, IN BOSTON WE'RE DOING  
PRETTY  
SURVIVAL RIGHT.  
IT'S 52%.  
THE NATIONAL AVERAGE IS 33%.  
SO WE'RE DOING PRETTY GOOD  
COMPARED TO THE REST OF THE  
COUNTRY.  
IF YOU'RE LOOKING TO THE COLUMN

ON THE RIGHT, CARDIAC ARRESTS,  
WHERE WE FIND THAT THERE WERE  
BYSTANDERS DOING Ht|CPR, AND THAT  
CAN JUST BE COMPRESSION ONLY,  
THEY

MOUTH-TO-MOUTH,ok 39% NATIONWIDE  
IS WHAT WE SEE, IN BOSTON IT'S  
ONLY 23%.

SO WE DO FEEL LIKE THERE'Sçó AREA  
FOR IMPROVEMENTt( THERE.

LAST YEAR, WE TRAINED THROUGH  
OUR COMMUNITY INITIATIVES

B

AND WE FEEL LIKE THAT'S GOING TO  
BE EFFECTIVE AND HELP US.

SO IF WE CAN BUMPq

NUMBERS YOU CAN ONLY EXPECTxD THAT  
OUR OVERALL SURVIVAL RATE WILL  
EVEN IMPROVE t(THERE.

SO, WE'REok MAKING THAT Añr PRIORITY  
FOR ALL OF OUR COMMUNI,y]iìC

BOSTON EMS WEBSITE WHICH IS  
LINKED TO THE CITY WEBSITE.

THEY'VE BEEN AROUND FOR A YEAR.

IN THOSE VIDEOS, THERE'S A  
LITTLE PICTURE ON THE SCREENq

SHOT, WE HAVE INFORMED EMTs FROM  
BOSTON EMS WHO AREok NATIVE

SPEAKERS WHO OFFER THE  
INSTRUCTION OF HOW TO DO

COMPRESSION ONLY CPR TO DO IT IN  
ENGLISH, SPANISH,Ñit( VIETNAMESE,lp

CANTONESE, PORTUGUESE, CREOLE,  
HAITIAN CREOLE, AND I'M NOT SURE

HOW MANY TIMES THEY'VE BEEN  
VIEWED, BUT I KNOW THAT A LOT OFxD

GROUPS HAVE TAKEN ADVANTAGE OF  
THAT.xDñr

EAST BOSTON.

%

NEWS AND THERE WAS A LOT OF  
DISCUSSION ABOUT IT, AND BACK ON

MARCH 12th, WE ADDED A SECOND  
AMBULANCE TO EAST BOSTON.

A27 IS ITS CALL SIGN.

IT WAS ADDED TO ADDRESSzv| THEe1  
RISING RESPONSEÑi TIMES IN THE

NEIGHBORHOOD, AND ALSO THE MAIN  
CONCERN THAT ONCE THAT AMBULANCE

OVER THERE IS OCCUPIED, IT'S  
TRANSPORTING TO A HOSPITAL ON

THE BOSTON SIDE OF THE HARBOR,  
SO IT'S BASICALLY OUT OF THERE

FOR A LITTLE WHILE.

OVER THE YEARS WE RELIED ON A SYSTEM OF AS SOONS AAMBULANCE 7 GOT A CALL WE WOULD START ANOTHER UNIT OVERx#xáz DOWNTOWN, WHETHER IT WAS AMBULANCE 1, 15, 6, 8, YOU NAME IT,e1 WE HAD AÑi PECKING ORDER WHICH WE SENT THEM OVER.

AS OUR CALL VOLUME HASi] INCREASED OVER THE YEARS, THATÑi DIDN'T REALLY SERVE AS WELL ANYMORE, BECAUSE THE LIKELIHOOD OF THOSE UNITS BEING CLEAR WAS GETTING LESS AND LESS.

SO WE DID START TO HAVE GAPS, IN OURq

PRIORITY ONEq TIMES IN EAST BOSTON WERE REALLY RISING COMPARED TO CITYWIDE.

SO, IT WAS CALLED FOR.

WE THENq

THE DAYxD SHIFT AND EVENING SHIFT, ANDÑi BECAUSE ON NIGHTS WE'RE DOING OKAY.

WE'RE MONITORING OUR RESPONSE TIMES THERE.Ñi

WE'VE ALREADYñr SEEN A 46 SECOND Ii" RESPONSE TIMES ON THE DAY SHIFT OVER IN EAST BOSTON, WHICH MAY #ú SIGNIFICANT, BECAUSE IT'S, YOU Lm DROP IN OUR PRIORITY 1 MEDIAN OVER THERE.

AND WE'VE ALSO NOTICED A ONE MINUTE --e1 FOUR MINUTE REDUCTION IN PRIORITYok RESPONSE TIMES ON THE EVENING SHIFT IN EAST BOSTON.

SO WE'RE SEEING A BENEFIT FROM THAT.

SIGNIFICANTLY, THOUGH, WE'VE ALSO SEEN THE BENEFIT FROM THAT, IS IN CHARLESTOWN, SOUTHe1 BOSTON AND DOWNTOWN, WE'RE SEEING REDUCTIONS IN OUR PRIORITY 1 MEDIAN RESPONSE TIME INñr CHARLESTOWN AND SOUTH BOSTON AS WELL.

BECAUSE AS I POINTED OUT, PRIOR TO THAT, THAT SECOND UNIT THAT WOULD BE GOING OVER TO EAST BOSTON WOULDt( BExD COMINGr THOSE NEIGHBORHOODS, OR FROM THE SEA PORT OR>3&MEWH-R+.1iáQ TRUCK IS GOOD ASe1 IT'S BEEN FOR

EAST BOSTON, IT'S BENEFITED EVERYBODY IN CHARLESTOWN AND DOWNTOWN, AS WELL. AND I EXPECT TO SEE FURTHER IMPROVEMENT, BECAUSE MASS PORT IS IN THE PROCESS OF CONSTRUCTING A SECOND GARAGE FOR US AT THE SITE OVER ON PRESCOTT STREET ON THEIR PROPERTY AND THEY ARE PUTTING IN A NEW LARGER OFFICE TRAILER FOR US. SO ONCE THAT HAPPENS, AND I'VE BEEN ASSURED THAT'S GOING TO HAPPEN THIS SUMMER, WE'LL BE ABLE TO SHIFT THE UNIT OVER THERE. CURRENTLY, AN AMBULANCE IS A RESERVE VEHICLE THAT CHANGES OUT OF SHIRLEY STREET AND ROXBURY SO CREWS COME IN, THEY HAVE TO TAKE TO EAST BOSTON, TAKE THEIR CALLS BUT THEN A SHIFT CHANGE IS BUSY PARTS OF DAY, THEY HAVE TO TRAVEL BACK, AND THEN THEIR RELIEF JUMPS IN AND GOES OVER BECAUSE WE DON'T HAVE A PLACE TO GARAGE IT OVER THERE - WHICH IS A REQUIREMENT BY EMS BUT ONCE THAT GARAGE IS COMPLETED AND IT IS FAST TRACKED, AGAIN WE'VE BEEN ASSURED WE'LL BE IN THERE THIS SUMMER WE'LL BE ABLE TO CHANGE THAT TRUCK, AND THAT REPORT IN EAST BOSTON AND THAT SHOULD GREATLY HELP WITH ANY OUTLYING CALLS OVER IN EAST BOSTON SO WE'RE GOING TO SEE FURTHER IMPROVEMENT. HUMAN TRAFFICKING. OUR MEDICAL THE EMS AGENCIES REALLY AROUND COUNTRY IN DEVELOPING TRAINING FOR EMS PERSONNEL IN HOW TO RECOGNIZE, HOW TO SUSPECT, PEOPLE WHO COULD BE VICTIMS OF HUMAN TRAFFICKING. AND EVERYTHING THAT THAT ENTAILS. WE DID SIMILAR TRAINING YEARS AGO FOR SUSPECTED VICTIMS OF DOMESTIC VIOLENCE, WHERE WHAT TO LOOK FOR, MAYBE SOME SUBTLE SIGNS. SO HOW TO MAYBE APPROACH A

PATIENT, AND HOW TO DO IT SAFELY  
WHEN THEY MAY BE OUT OF EARSHOT OF OTHERS.

OR MAYBE JUST PASS THAT  
INFORMATION OUT OF A HOSPITAL  
WHERE THEY HAVE A BETTER ABILITY  
TO TALK WITH THE PATIENTS.  
YOU KNOW, AWAY FROM SOMEBODY WHO  
MAY BE TRYING TO CONTROL THEM,  
OR MANIPULATE THEM, OR:  
INFLUENCE THEM.

AND SO WE'VE BEEN ROLLING THAT TRAINING  
OUT WITH ALL OUR RECRUIT CLASSES.  
WE'VE DONE IT WITH OUR  
SUPERVISORS, AND WE'RE ROLLING IT  
OUT WITH OUR INCUMBENT  
WORKFORCE AS WELL.

THAT WAS TRAINING DONE IN  
CONJUNCTION AND DEVELOPED WITH  
THE FAMILY JUSTICE CENTER, WITH  
BOSTON PUBLIC HEALTH COMMISSION  
PROGRAMS UP IN BRIGHTON, AND  
ALSO WITH THE SEXUAL ASSAULT  
UNIT FROM THE BOSTON POLICE  
DEPARTMENT, WHICH HAS WORKED  
WITH US OVER THE YEARS IN  
VARIOUS PROJECTS.

AND IT'S BEEN GREAT TO WORK WITH  
THAT GROUP.  
CONTINUING PARTNERSHIPS.

BEAR WITH ME.

I'M ALMOST DONE.

SO, WE -- WE'RE IN A GOOD  
POSITION BECAUSE WE DO GATHER A  
LOT OF INFORMATION ON CALLS.  
AND WE SHARE A LOT OF THAT  
PUBLIC HEALTH, BUT ALSO WITH  
CITY DEPARTMENTS.

ONE IS VISION ZERO.

WE CONTINUE TO SUPPORT ROADWAY  
SAFETY MEASURES THROUGH USE OF  
OUR DATA TO IDENTIFY HOT SPOT  
LOCATIONS THROUGHOUT THE CITY.  
OVER THE YEARS SOME OF OUR  
INFORMATION AROUND PEDESTRIANS,  
BICYCLISTS, CARS, WHERE  
TYPES OF TRUCKS ARE INVOLVED, OR  
THE CARS INVOLVED, EVEN  
GETTING DOWN TO SOME GRAB U  
LAIRTY ON THE BIKES WAS BIKE  
VERSUS BIKE, WAS IT BIKE VERSUS  
A DOOR, WHICH WE CAN PULL A LOT  
OF INFORMATION OUT OF OUR

ELECTRONIC CHARTS.  
AND WE SHARE THAT WITH"  
TRANSPORTATION>/Q#ICIAju HERE.  
SOME OF THAT HAS HELPED TO  
INFORM THEM WHERE YOU'RE GOING  
TO PUT THEok BIKE LINES -- BIKE  
LANES NEXT.5a|  
BECAUSE THEY'RE MORE SEVERE OR  
FREQUENT.  
ARE THERE ISSUES AROUND CERTAIN  
INTERSECTIONS FOR PEDESTRIANS.  
THEY USE A LOT OF THAT DATA TO  
MAKE TRAFFIC CALMING AND OTHER  
DECISIONS DOWNel THERE.  
WE'RE VERY PROUD TO SAY WE'VE  
BEEN A QUIETçó PARTNER IN THAT.  
ONE OF THE THINGS THE PUBLIC CAN  
SEE NOWo  
LOCATIONS OF ROADWAY INCIDENTS  
ON THE CITY'S WEBSITE.  
WE VERIFY THE q  
PROTECT THE PATIENTS, YOU KNOW,  
MEDICAL HISTORY, ó.tçó CONDITIONS,  
WE DON'T PUT ANY OF THATq  
THERE, BUT THE P]lKCEçó DEPARTMENT  
PULSE THE INFORMATION FROM CAD  
ABOUT VARIOUS INFORMATIONS ANDok  
WE WILL CONFIRM WHETHER IT WAS  
BICYCLE, PEDESTRIAN, OR  
THAT Tonb| POPULATE THIS MAP THAT'S  
ON THE CITY'S WEBSITE, SO PEOPLE  
CAN DO THEIR OWN ANALYSIS.  
BECAUSE WE ALL GET A LOT OF  
REQUESTS FOR DATA, AND THIS@,cV  
IT'S BEEN VETTED BY ALL THE  
AGENCIES.  
WE ALSO WORK VERY CLOSELY WITH  
THEçó BUREAU OF RECOVERYok SERVICESr  
THROUGH THEok COMMISSION, AND WITH  
OBTAINING IN THE MAYOR'S OFFICE  
OFÑié@|Ñil| -- DRY MOUTH.  
ONE SECOND.ñrÑiel  
THE MAYOR'S OFFICE RECOVERY  
SERVICESLAYM  
WE COLLECT DATA ON A DAILY 5a|  
BASIS.  
WE REVIEW ALL SUSPECTED NARCOTIC  
RELATED INCIDENTS, AND WE HAVE  
FOR OVER 12 YEARS NOW.ÑixDxD  
WE'VE -- WE RECORD TRENDS,ol'| I  
BELIEVE WE'Ve]pUÙ  
THAT INFORMATION IN YOUR PACKET.  
AND I KNOW THERE WAS SOME  
QUESTION.

WE ALSO TRY TO USE THAT TO TRY TO, YOU KNOW, HELP INFORM WHERE WE MIGHT WANT TO DO MORE OUTREACH, MORE TRAINING IN THE COMMUNITY.

AGAIN, ANYTHINGxD THAT OUR INFORMATION CAN BE USED FOR TO HELP FURTHER THE EFFORTS TO DEAL WITH THIS EPIDEMIC OFt( OPIOID USE IS WELCOME BY US.

I KNOW THEREi] WERE SOME QUESTIONS LAST WEEK AROUND IT,Ñi AND WE CAN GET INTO IT LATER IF YOU WANT. WE ARE STILL CONTINUING TO SEE AN UPWARD TREND IN TOTAL NARCOTIC RELAT(éz ILLNESSES. AN INCREASE IN THEçó USE OF ADMINISTRATIONr PROBABLY A SLIGHT INCREASEÑi IN DEATHS, ON PAR WITH LATHÑi YEAR.[ BECAUSE WEw3çpGñ DO GET FLUCTUATIONS WHERE SOME MONTHS, SOME WEEKS AREN'T AS BAD AS OTHERS, AND SOME WEEKS ARM;k WORSE THAN xD OTHERS.

SO WE'REe1 WILLIN ROLLS OUT AT THE END OF THE YEAR.

BUT, JUST TO TELL r LAST WEEK, OUR TOTAL NARCOTIC RELATED ILLNESSES THAT BOSTON EMS ENCOUNTEREDE1 WAS 1,214,A5! AS OPPOSED TO 1,049 LAST YEAR. REFERRED TO THE MEDICAL EXAMINER, THIS YEAR, 29Ñi CASES, LAST YEAR, THAT WAS 30.

SO THAT'S ABOUT EVEN. NARCAN, 20%ok INCREASE IN THE AMOUNT OF NARCAN THAT'S BEEN ADMINISTERED THIS YEAR. AND THAT'S BY WHETHER IT WAS -- WE GO BY WHOEVER GAVE IT FIRST. SO Ift( POLICE, FIRE OR US, OR THE SHELTERS OR ANYONE ELSE GAVE IT, WE ONLY COUNT IT ONCE. THAT MEANS THAT'S AN INDIVIDUAL PATIENT RECEIVED AT LEAST ONE DOSE OF NARCAN.

ONE NUMBER THAT'sB CONCERNING THAT IS UP THIS YEAR, IS THE CARDIAC ARREST THAT WERE c TRANSPORTED TO HOSPITALS. COMPARED TO HISTORICALfá NUMBERS, WE'RE ENCOUNTERING MORE PATIENTS

THAT AREN'T BEING REFERRED TO ( THEY'RE FOUND TO BE PULSELESS AND WE'VE INITIATED xDCPR, WE MAYBE GET PULSES BACK, WE TRANSPORT THEM TO THE HOSPITAL, <-D8ONLY TO FINDxD OUT, MAYBE EVEN DAYS LATER THAT THESE PERSONNEL DON'T WAKE UP, THEY ACTUALLY DO LIFE SUPPORTok BECAUSE THEY HAV]!á BEEN FOUND DOWN FOR A BIT. SO WE HAVE IN SOME INITIAL SUCCESS.

SO THE CARDIAC ARREST TRANSPORT THIS YEARht! ASxD OF LAST WEEK WASKc@&HCW? LAST YEAR WAS 6.

AND, OUR FEELING IS THAT MOST -- MANY OF THOSE DO GO ON TO WIND UP IN THExD SUSPECTED, YOU KNOW, DEATH COLUMN, AS !U!WELL. SOé5-rjÑ WHERE WE'RE SAYING WE'RE STILL PRETTY MUCH ON PAR WITH LAST YEAR.

OH, AND I'M SORRY, THE BEST TEAM.

WE'VE BEEN WORKING WITH THE BEST TEAM.

I KNOW THAT THIS BODY APPROVED ADDITIONAL POSITIONS FOR THE BOSTON POLICE DEPARTMENT TO PUT CLINICIANS OUT IN THE FIELD.

I B[,%EVE THERE ARE THREE RIGHT NOW AND THEY'RE TRYING TO GET THU?Q MORE.

WE'VE BROUGHT THEM IN TO ALL OF OURw3 TRAININGS THIS LAST TRAINING CYCLE.

WHENq@UT

ONE TO MAKE SURE OUR PEOPLE KNOW THEY'RE A RESOURCE AND THEY'RE OUT THERE.

THERE ARE SOME PEOPLE WHO DON'T NECESSARILY HAVE TO GO TO AN EMERGENCY ROOM WHO CAN GETÑi COMMITTALS, OR TRANSPORTED WITH THESEñr CLINICIANS, WHOñr WENT TO BOSTON POLICE DEPARTMENT,lp PERHAPS DIRECTLY TO SOLOMON CARTER, OR TO THE LINDMAN BECAUSE MAYBE THAT'S

PARTICULARLY WHAT THEY NEED. SO IT'S ONE THING THAT DOES FREE US UP UP>&táz A CALL THAT SOMETIMES ARE DIFFICULT TO MANAGE.

AND, IN ALSO TRYING TO GET THE

PATIENT TO A LOCATION THAT THEY REALLY NEED.

MAYBE THEY DON'T HAVE TO GO SIT IN AN EMERGENCY ROOM FOR FOUR HOURS THERE.

SO, WE'RE TRYING TO TAKE ADVANTAGE OF THAT, AND ENHANCE OUR TRAINING SO WE CAN ALSO GET BETTER WITH DEALING WITH THE MANY MORE PSYCHIATRIC EMERGENCIES THAT WE'RE ENCOUNTERING IN THE FIELD.

OUR OBJECTIVES FOR THIS YEAR INCLUDE, YOU KNOW, THE RISING CALL VOLUME AND SUBSEQUENT RESPONSE TIMES.

THE MAYOR HAS RECOMMENDED AND SUBMITTED IN THE BUDGET TO INCREASE OUR FTE COUNT BY 20 ADDITIONAL UNIFORM STAFF. THOSE ARE THE EMTs COMING IN THE DOOR.

THAT WOULD BE TERRIFIC. AS YOU RECALL, TWO YEARS AGO, WHEN YOU LAST INCREASED US BY 20. WE USED THAT, WE DEPLOYED TWO ADDITIONAL AMBULANCES IN THE DAY AND EVENING SHIFT, OUR TWO BUSIEST SHIFTS, AND A THIRD ONE ON THE NIGHT SHIFT. RIGHT NOW, OUR PLANS WOULD BE TO FOLLOW SUIT THERE.

TO MAKE SURE THAT WE'RE ADDING MORE OF THOSE ZONE IMPACT TRUCKS OUT THERE TO FILL THE AREAS WE SEE OUR RESPONSE TIMES ARE CREEPING UP, SIMILARLY TO WHAT WE SAW IN EAST BOSTON.

AND THAT WILL ALSO ALLOW US THAT -- ONE OF THOSE TRUCKS WILL BE THAT AMBULANCE 27 IN EAST BOSTON BECAUSE CURRENTLY NOW, WE'RE STAFFING THAT AT 100% ON OVERTIME.

SO WHEN WE STARTED DOING THAT IN SEPTEMBER -- I'M SORRY, MARCH 12th, WE ESTIMATED THAT WAS GOING TO COME AT \$175,000 IN OVERTIME. YOU KNOW, IT'S BEEN MONEY WELL SPENT.

WE'VE SEEN THE IMPROVEMENTS IN THE AREA.

BUT WITH THE INCREASE OF THESE PERSONNEL, WE'LL BE HIRING IN JULY, AND THEN THEY'LL BE GRADUATING SIX MONTHS HENCE, THEY'LL BE THEN REGULAR DUTY PERSONNEL THERE, WHICH IS GREAT FOR US.

ONE OF THE THINGS WE'VE BEEN TRYING TO DO IS ENHANCE RECRUITMENT, AND THROUGH DIVERSITY, AND OFFER PATHWAYS OUR RESIDENTS TO BECOME EMTs. AND TO COME AND APPLY FOR US AT EMS.

AS I ALLUDED TO EARLIER, OUR TRAINING ACADEMY HAS BEEN OUR EMT TRAINING CLASS HAS BEEN OUR BEST ROUTE OVER THE LAST DOZEN YEARS FOR ETHNIC, DIVERSITY, LANGUAGE CAPABILITY FOR US AND OUR BIGGEST BAR TO HIRING WHEN WE POST FOR RECRUIT CLASS IS THAT YOU HAVE TO ALREADY BE A CERTIFIED EMT.

SO, WITH THAT IN MIND, WE APPROACHED THE MAYOR'S OFFICE OF WORKFORCE DEVELOPMENT THIS YEAR TO SEE IF WE COULDN'T REALLY BUMP UP OUR ABILITY TO GET QUALIFIED CITY RESIDENTS TO COME AND TAKE OUR TRAINING.

AND, THEY LIKED THE IDEA, AND THEY WORKED VERY HARD WITH US, THEY'RE TERRIFIC TO WORK WITH, AND THEY HAVE DEVELOPED A PROGRAM WHERE YOU HAVE A FLYER IN YOUR PACKET, WHERE THEY'VE BEEN INTERVIEWING APPLICANTS. THEY'VE BEEN DOING A LOT OF WORK FOR US, AND ACTUALLY YOU KNOW WHAT I'M GOING TO DO?

STAFF HERE AT BOSTON EMS WHO HAS BEEN WORKING PRETTY MUCH IN LOCKSTEP WITH THEM TO GIVE YOU A QUICK DESCRIPTION.

BECAUSE LAURA'S DONE SO MUCH OF THE HEAVY LIFTING ON THIS.

>> CERTAINLY, IT'S BEEN A GREAT PARTNERSHIP.

THEY'VE INTERVIEWED ABOUT 100 CANDIDATES.

THEY HAVE ABOUT 300 THAT HAVE APPLIED.

SO THEY WILL CONTINUE TO INTERVIEW.  
AND THOSE INDIVIDUALS WHO ARE SELECTED, THEY'RE LOOKING AT ABOUTZv  
WILL BE ENROLLED IN AN UPCOMING EMT CLASS IN AUGUST.  
THAT WILL MAKE THEM BY THE END OFá t  
WITH THE CLASS, SO THAT BY SPRING WHEN WE DO A HIRING AGAINxD  
WE WOULD HAVE THOSE WHOq COMPLETED THE PROGRAM ELIGIBLE TO WORK FOR US.  
AND AGAIN, IT'S BEEN A GREAT PROGRAM.  
THEY WILLt(ok WORKt(RÁH THE CANDIDATES THROUGHOUTr  
PROCESS, SO NOT ONLY WILL THEY OFFER THEM A SCHOLARSHIP FOR THE EMTñi CLASS, THEY ARE INCLUDING A lp  
THREE-WEEK PRECLASS PROGRAM FOR THEM TO ENSURE THAT THIS IS WHAT THEY WANT TO DO.  
AND TO PROVIDE SOME PRE-ES  
STUDY TIPS AND OTHER TRAINING, PROFESSIONAL okDEVELOPMENT, AND THEN THROUGHOUT THE CLASS,i] THEY  
WILL BE CHECKING IN WITHñr OUR TRAINING PROGRAM TOñi ENSURE THAT THEY AREñi APPROPRIATELY  
SUPPORTED, THEY RECEIVE THE okr MENTORSHIP, THEY RECEIVE STUDY SKILLS, ET CETERA, AND THAT WILL  
CONTINUE INTO EMPLOYMENT WITH US TO ENSURE THAT WE HAVE THE ATTENTION OF THESE CANDIDATES.fá  
>> okxDTHANKS, LAURA.  
AND ONE OF THE -- A FEW OF THE THINGS IN THERE IS WE MET WITH THEM.  
WE TALKED ABOUT SOME OFrMJ THE POTENTIAL BARS TO PEOPLEok COMING TO WORK FOR US.r  
TAKINGok THE EMT r  
IS FAIRLY LOW COST, \$750.xDfá  
WHEN WE GO OUT TOñi DIFFERENT COMMUNITY GROUPS AND APPROACH YOUNG PEOPLE THE FIRST THING  
THEY'D SAY IS, WELL, IS THERE A PAYMENT PLAN?  
IS THERE THIS?  
IS THERE THAT?

WE REALLY WEREN'T STRUCTURED FOR THAT.

OR ARE THERE SCHOLARSHIPS 73 AND THE UNION DID OFFER SOME AND NOW AND THEN SOMEBODY WHO MAKE A LITTLE GIFT TO THE RELIEF ASSOCIATION AND THEY WOULD SPONSOR ONE.

BUT THOSE WERE SORT OF CATCH AS CATCH CAN.

SO OUR ABILITY TO FINANCE THIS FOR PERSONNEL IS TERRIFIC.

AND ONE OF THE THINGS THE BOSTON EMS RECRUIT ACADEMY HAS NOW BEEN APPROVED BY THE OFFICE OF LABOR AND WORKFORCE DEVELOPMENT, AS AN OFFICIAL, THIS WILL QUALIFY US AS AN AS SOMEBODY GOING INTO THE TRADES.

BECAUSE IT MEETS THE MINIMUM REQUIREMENTS APPRENTICESHIP.

SO I'M HOPING THAT THIS WHOLE IDEA COULD JUST CATCH ON WITH EITHER OTHER DEPARTMENTS, OR WITH OTHER EMS AGENCIES AROUND BECAUSE IT IS A GOOD OPPORTUNITY FOR YOUNG PEOPLE.

SO WITH THAT I'LL STOP.

>> THANK YOU.

THANK YOU,

AND SHORTLY AFTER YOU STARTED YOUR PRESENTATION WE WERE JOINED BY COUNCILORS FRANK BAKER, ED FLYNN, MICHELLE WU, AYANNA PRESSLEY AND TIM MCCARTHY.

SINCE YOU ENDED ON RETENTION, HOW IS RETENTION GOING WITH THE CURRENT WORKFORCE THAT WE HAVE? WERE YOU ABLE TO BACKFILL THE NECESSARY POSITIONS, BASED ON RETIREMENTS OR OTHER FACTORS OF PEOPLE LEAVING THE JOB?

>> WE'VE BEEN

WITH REGULAR CLASS.

WE'VE HAD MINIMUM ONE RECRUIT CLASS PER YEAR.

THE LAST COUPLE OF YEARS WE'VE BEEN SUCCESSFUL AND SUPPORTED BY MAYBE HAVING TWO PER YEAR. FOR EXAMPLE, IN ANTICIPATION OF THE 20 FTEs COMING UP WE'VE

ALREADY STARTED A PROCESS, WHICH  
WOULDN'T BRING IN 20 ADDITIONAL  
PERSONNEL.

NOW, SINCE THEN, WE'VE LOST I  
BELIEVE 4

EITHER B. RETIREMENT, WE JUST GOT  
ANOTHER NOTICE THAT ANOTHER  
MEMBER IS RETIRING THE END OF  
THIS MONTH AND REGRETTABLY WE  
JUST RECEIVED TWO

RESIGNATION FROM FAIRLY RECENT  
EMTs, PEOPLE ON THE JOB LESS  
THAN FIVE YEARS, AND

RELOCATING.

ONE TO TEXAS AND ONE TO SOUTH  
CAROLINA FOR FAMILY NEEDS.

SO IT'S

ISSUE.

HOWEVER, NOT ONE OF THE THINGS THAT  
PUBLIC HEALTH'S BEEN VERY GOOD  
ABOUT SUPPORTING US HAS BEEN  
WHERE WE'VE PUT A CLASS ON  
BEFORE, SAY IF WE ANTICIPATE WE  
HAD 18 OPENINGS.

WE KNOW THAT WE LOSE SOME PEOPLE  
IN THE PROCESS.

OR MAYBE THEY SAY YOU KNOW, THIS  
ISN'T REALLY WHAT I THOUGHT I  
WAS GETTING INTO.

IN OTHER YEARS, CONSISTENTLY  
ALLOWED US TO EVEN BRING ON A  
COUPLE OF EXTRA PERSONNEL.

BECAUSE THEY KNOW THAT BY THE  
END OF THE SIX-MONTH PERIOD  
GIVEN OUR HISTORICAL ATTRITION,  
WE'RE GOING TO LOSE A COUPLE OF  
MORE BODIES.

SO, THE IDEA IS WE TRY NOT TO  
LET SEATS BE VACANT FOR VERY  
LONG YEAR.

YES IT TAKES A LITTLE WHILE  
ESTABLISH AND PUT A CLASS  
TOGETHER AND THAT'S WHY  
SOMETIMES WE DO HAVE UNFILLED  
VACANCIES FOR SEVERAL MONTHS.

BUT, AS SOON AS WE GET THAT  
OPPORTUNITY, SOMETIMES WE  
ACTUALLY ALMOST WILL GO OVER OUR  
FTE COUNT JUST TO GET THE COUNT.

AND WE'VE BEEN VERY PRO-ACTIVE  
WITH THAT WITH EVERYONE'S HELP.

THE RETENTION, WE'VE OVER THE  
YEARS, MAYBE THE FIRST 20 OR SO  
YEARS?; THAT I WAS MAYBE NOT

PAYING ANY ATTENTION TO THAT  
BEFORE I GOT THIS POSITION  
ALMOST TEN YEARS AGO WE USED TO  
AVERAGE ABOUT 13 PEOPLE A YEAR  
WHO LEFT FOR VARIOUS REASONS.  
RETIRED, THEY DECIDED TO GO ON  
TO NURSING, OR P.A. SCHOOL, SOME  
WOULD GO ON TO MEDICAL SCHOOL  
JOB, AND SAY GEEZ I LIKE U%9  
WITH A ROOF OVER MY HEAD AND  
WARM AND DRY AND AIR CONDITIONED  
IN THE SUMMER.  
AND SO SOME PEOPLE DO MOVE ON.  
>> RIGHT.  
>> AND SOME PEOPLE IF I GIVEN A  
CHANCE THEY'LL MAYBE GO TO  
POLICE OR FIRE FOR OTHER  
REASONS, STUFF OVER THERE, WHEN  
AN EXAM COMES UP.ok  
ONE OCCASION PEOPLE RELOCATE.l  
WHICH I'M SURE --  
>> OBVIOUSLY ALL KINDS OF  
REASONS.  
I GUESS I'D BE MORE CONCERNED  
WITH PEOPLE LEAVING FOR ANOTHER  
EMS JOB, IF WE'RE NOT  
COMPARED TO  
BENEFITS, OR ARE YOU SEEING  
PEOPLE LIKE GOING FROM  
TRAINED BY US,  
THEREAFTER MAYBE GOING TO WORK  
FOR ANOTHER EMS OR PRIVATE  
TRANSPORT COMPANY?  
>> YEAH, THANK YOU COUNCILOR,  
FROM WHAT WE'VE SEEN, WE'VE DONE  
OUR EXIT INTERVIEW AND TALKED  
TO PEOPLE, WE DON'T LOSE TOO  
MANY TO THE  
OBVIOUSLY, OUR WAGES,  
HERE ARE VERY COMPETITIVE!  
THAT.  
WHERE WE DO  
UNFORTUNATELY WHO WE TRAIN AND  
EVEN WE'VE LOST SOME PARAMEDICS,  
THEY GET A LOT OF EXPOSURE  
THEY GET A LOT OF PRACTICE HERE.  
THEY GET A LOT OF EXCELLENT  
TRAINING HERE.  
THEY GET A LOT OF ENHANCED  
TRAINING THAT YOU DON'T SEE IN  
OTHER AGENCIES AND SO THEY DO  
BECOME DESIRABLE, AND IF YOU GET  
SOMEBODY NOW WHO IS ON A LIST TO  
GET A PHONE CALL FROM MAYBE SOME

OF THE SUBURBAN FIRE DEPARTMENTS  
THAT OFFER AMBULANCE, THEY MAY  
ACTUALLY, SOME OF THEM WILL TAKE  
THE SAME MONEY OR LESS MONEY,  
THEY'LL BE ATTRACTED, HOWEVER,  
BY  
WORK EIGHT, 24 HOURS IN A MONTH  
SHIFTS.

OR, THE CALL VOLUME JUST ISN'T  
THE SAME.

YOU KNOW, YOU'RE NOT DOING 350  
CALLS IN A 24 HOUR PERIOD WITH  
22 TRUCKS, AND SO THEY MIGHT BE  
ATTRACTED TO GO THERE.

SO IT'S REALLY IT'S A LIFESTYLE  
THING.

WE'VE LOST PEOPLE TO DEPARTMENTS  
ON THE CAPE, OR SOME SUBURBS,  
AND THEN THEY HAD THE  
OPPORTUNITY TO GO OUT AND WORK  
FOR ANOTHER BUSINESS ON THE  
SIDE.

SO SOME OF IT IS A LIFESTYLE  
REASON.

>> SURE. BUT WE'RE UP TO KEEP UP  
BECAUSE OBVIOUSLY OUR POPULATION  
AND WE'VE TALKED ABOUT THIS FOR  
THE LAST SEVERAL YEARS, OUR  
POPULATION CONTINUES TO RISE AND  
IT SEEMS LIKE WE'RE ALWAYS  
TRYING TO KEEP UP.

AND IT LOOKS LIKE MOST OF THE  
RESPONSE TIMES HAVE SOMEWHAT  
LEVELED OFF BUT WE ARE KIND OF  
CHASING OUR TAIL INsofar AS THE  
POPULATION KEEPS GOING UP YOUR  
CALL DEMAND KEEPS GOING UP.  
THE HISTORICAL FTE, WE'RE GOING  
UP TO 395 IN FY 19, WE WERE AT  
375 IN FY 17, WHAT WERE WE -- IN  
YOURMS DO YOU RECALL?

>> WE WERE LESS THAN THAT, BUT  
WE WERE I BELIEVE IN 2009, 2008,  
WE WERE APPROACHING THIS LEVEL  
NOW.

AS A MATTER OF FACT, WE HAD JOB  
OFFERS OUT, AND WE HAD A CLASS  
OF 44 THAT WAS GETTING READY TO  
COME ON AND AS YOU RECALL THAT'S  
WHEN THE HOUSING BUBBLE BURST  
AND THE WHOLE RECESSION CAME IN.  
THE POLICE WOUND UP CANCELLING A  
CLASS, THEY LAID OFF THEIR  
CADETS, FIRE CANCELLED A CLASS.

AND THEN THAT CLASS THAT WAS  
FIVE DAYS AWAY FROM STARTING WE  
HAD TO SEND THEM ALL LETTERS  
SAYING SORRY, WE'LL KEEP YOU IN  
MIND --

>> IN THE FUTURE.

-- WHEN WE CAN.

WE WILL NOW WITH THIS FUNDING  
CYCLE HERE, WE'LL HAVE FINALLY  
HAVE CAUGHT UP.

YOU KNOW WITH THAT.

UNFORTUNATELY WHAT HAPPENED  
AFTER THAT, WITH THAT FREEZE IN  
HIRING THAT ALL STORMS SUFFERED  
THROUGH, FOR A CUSTOM YEARS  
THERE, WE CONTINUED TO TAKE SOME  
OF OUR ATTRITION LOSSES.

OUR RECRUIT CLASSES AFTER THAT  
WERE REALLY GEARED TOWARDS  
MAINTAINING THE STATUS QUO,  
FILLING THE SEATS THAT WE HAD  
THEN, AND EXPANSION WAS A LITTLE  
BIT DIFFICULT.

BUT THE LAST COUPLE OF YEARS  
AGO, WE HAVE SEEN TWO YEARS AGO,  
20 PERSONNEL, LAST YEAR, BEFORE,  
THAT WAS IMPORTANT LAST YEAR  
EVEN THOUGH IT WAS JUST FOR --  
THAT WAS IMPORTANT BECAUSE WE  
WERE LOOKING AT THE RISE IN CALL  
VOLUME AND RESPONSE TIMES IN  
TRYING TO BE SMARTER ABOUT HOW  
WE MANAGE IT.

HOW DO WE PRIORITIZE CALLS?

BECAUSE WE KNOW EVERY  
DEPARTMENT, I'LL COME EVERY YEAR  
AND ASK YOU FOR MORE PERSONNEL  
AND EQUIPMENT, I'M NOT SHY ABOUT  
THAT.

BUT I KNOW EVERYONE'S GOT  
COMPETING INTERESTS, RIGHT,  
OTHER GARMENTS, AND SO WE WANT  
TO MANAGE SMUMENT AS MUCH AS WE  
CAN.

-- AS MUCH AS WE CAN.

SO IN CASES OF DOWNTOWN WHEN WE  
HAD A HIGH PERCENTAGE OF THE  
UNKNOWNNS, IF WE CAN MANAGE AND  
STEER THAT AT LEAST WE KEEP  
PACE, AS YOU SAY, KEEP ADDING  
PEOPLE, WISELY PUT THEM WHERE WE  
ARE SO WE'RE VERY MUCH TRYING TO  
BE DATA-DRIVEN ON THAT AND BE  
ABLE TO DEMONSTRATE THE NEED

WHEN IT'S THERE.

>> LET ME END MY LINE OF QUESTIONING WITH THANKING THE MAYOR AND MY COLLEAGUES FOR THEIR COMMITMENT TO CONTINUE TO SUPPORT EMS, MORE PERSONNEL ON THE STREET WHEN THE DEMAND IS THERE.

I WANT TO THANK YOU CHIEF FOR ALL THE WORK YOU DO AND MEN AND WOMEN THE FIELD AND I WANT TO GIVE COUNCILOR O'MALLEY THE FLOOR.

>> THANK YOU MR. CHAIR.

BEYOND IF I'VE EVER BEEN AT THE TOP OF THE QUEUE.

BOSTON EMS ARE THE UNSUNG HEROES, DAY IN DAY OUT, I'VE DONE A NUMBER OF RIDE ALONGS, IT BEARS REPEATING, THE 420 CALLS FOR THE DASH, IT WAS 420 CALLS FOR A 24 HOUR PERIOD AND JUST THAT NIGHT WE HIT EVERYTHING AND I JUST REALLY VALUE THE WORK THAT YOU DO.

AND IT'S EVIDENT BY YOUR LEADERSHIP THAT WE HAVE GOT THE BEST AND THE BRIGHTEST IN THE COUNTRY WORKING FOR BOSTON EMS. DELIGHT TO SEE THAT.

ADDITIONAL 25 NEW EMTS AND PARAMEDICS.

>> 20 IS THE INCREASE IN THE PARAMEDICS BUT WE'LL ATTEMPT TO FILL OTHER VACANCIES BETWEEN NOW AND THEN, YES.

>> IS IT A SPLIT BETWEEN EMT AND PARAMEDICS?

>> FOR NEW HIRES IT IS EMT RECRUITS WHO TRANSFER INTO THE PARAMEDIC ROLE, WE DO HE PROMOTIONAL OPPORTUNITY, FIVE OR SIX PARAMEDICS EARLIER THIS YEAR WHO WERE EMT POSITIONS GOT CONVERTED OVER.

SO IF WE LOSE MEDICS WE'LL DO A PROMOTIONAL SPOT FOR CAPTAINS.

>> IS THAT FIGURE ENOUGH GIVEN THE FACT THAT THE POPULATION OF THE CITY IS GROWING SO MUCH? I MEAN ANY INCREASE IS A GOOD ONE, I KNOW THE MAYOR IS COMMITTED TO THAT BUT SHOULD WE EVEN BE THINKING DOWN THE ROAD

YOU KNOW TWO, THREE YEARS FROM NOW OF GROWING THAT EVEN MORE?

>> THAT'S A GOOD IDEA.

WHAT WE'RE TRYING TO DO ALSO IS COME IN LINE WITH, IT WAS IMAGINE BOSTON 2030, SO THAT WHAT DO WE THINK NUMBER'S GOING TO BE?

OUR RESIDENTIAL POPULATION I KNOW IT'S UNDER 700,000 NOW BUT OUR DAYTIME POPULATION, SERVICE POPULATION, THE PEOPLE WHO COME TO WORK, PLAY, GO TO HOSPITALS, YOU NAME I.T. HERE, BOSTON SWELLS TO 1.2 MILLION IS OUR SERVICE POPULATION.

WE HAVE TO TAKE CARE OF.

SO WITH IDEAS OF WHAT'S THE PROPER WAY TO LOOK, SO LIKE I SAID BEFORE EVERYTHING IS DATA-DRIVEN.

ANY ONE OF US COME IN AND SAY WE NEED MORE HELP, THAT'S FINE, AND THAT'S TRUE BUT IT'S SHOW ME, DEMONSTRATE.

>> AND WE SHOULD.

>> ARE WE DOING THE BEST -- 20 PEOPLE, HOW WE'RE RESPONDING TO CALLS, EVERYTHING.

BUT I THINK THAT IF WE LOOK AT ALL OF THAT, AND GOING FORWARD AND STUFF, WE'LL BE ABLE TO MAKE GOOD DECISIONS, GOOD RECOMMENDATIONS, WHEN WE DO COME INTO BUDGET CYCLES.

>> OKAY, THANK YOU FOR THAT CHIEF.

PROGRAM REVENUE HAS INCREASED SLIGHTLY BY ABOUT 235,000, WHAT ACCOUNTS FOR THAT?

>> WELL, WE'VE SAID AN INCREASE IN TRANSPORTS.

MOSTLY, YOU KNOW.

ABOUT TWO-THIRDS OR SO OF OUR BUDGET HISTORICALLY IS WHAT WE'VE BEEN ABLE TO GET IN BUILDINGS FOR TRANSPORTS.

>> IS THAT PART OF THE TWO-THIRDS REIMBURSEMENT, IS THAT ON PAR WITH OTHER CITIES IN THE UNITED STATES?

>> THAT I'D HAVE TO GET BACK.

>> MORE CURIOUS THAN ANYTHING ELSE I WANT TO SEE IF IT'S HIGH,

IT MAY EVEN BE HIGHER GIVEN  
PROXIMITY.  
AND THEN, LET ME SEE.  
SO HOW BIG A FLEET OF AMBULANCES  
DO YOU HAVE NOW?  
>> WE'RE LINED -- LICENSES TO  
HAVE 15 AMBULANCES IN OUR FLEET  
SO THAT INCLUDES THE FRONT LINE  
UNITS.  
THAT DOES NOT INCLUDE THE  
SEVERAL THAT ARE ON ORDER, AND  
WILL BE DELIVERED THIS MONTH.  
OR THE ONES WE WILL ORDER NEXT  
CASUAL.  
WE'LL BE ON THE BUDGET TO ORDER  
ADDITIONAL TRUCKS THERE.  
WE TAKE SOME OF THE OLDER TRUCKS  
THAT ARE REALLY AT THE END OF  
THEIR LIFE CYCLE, TAKE THEM OFF  
THE BOTTOM.  
SOME OF THOSE DO GET SOLD, SOME  
OF THEM GET TRANSFERRED, SOME  
HAVE BEEN USED BY RECOVERY  
SERVICES TO HELP OUT WITH A --  
SOME MOBILE SHARPS.  
OTHER YEARS THE POLICE  
DEPARTMENT CONVERTED IT TO ONE  
OF ITS CRIME SCENE UNITS.  
>> SORRY TO CUT YOU OFF.  
WHAT IS THE LIFE SPAN OF AN  
AMBULANCE, FOUR YEARS OR SO?  
>> WE CAN GET FOUR, FIVE YEARS  
OUT OF ONE.  
BUT TYPICALLY WHAT IT IS IN  
FRONT LINE USE, DAY-TO-DAY USE,  
FRONT LINE SERVICE AS YOU SAY IN  
A BUSY SYSTEM, THREE YEARS,  
LITTLE BIT LONGER, PUSHING IT  
APRIL THAT, SYSTEMS, START --  
THEN.  
>> WE DON'T WANT TO -- IT'S FINE  
FOR US TO TRY TO EXTEND OUR CAR  
LIFETIME.  
WE WANT TO MAKE SURE THAT --  
>> THANK YOU, THANK YOU.  
THE IDEA IS THAT WE WANT TO BE  
ABLE TO ROTATE OUT OUR FRONT  
LINE AMBULANCES ABOUT EVERY  
THIRD YEAR.  
AND WE HAVE FINALLY GOTTEN BACK  
ON OUR REPLACEMENT SCHEDULE FOR  
THAT, FOR A COUPLE OF YEARS THAT  
WAS PUT ON HOLD BACK IN TWEAN  
2013, WHEN WE LOST THE UNCOMPENSATED

CARE, THERE WAS SOME PRETTY GOOD CUTS AND LAYOFFS IN THE DEPARTMENT AND ONE OF THE WAYS WE BALANCED THE BUDGET FOR ABOUT TWO YEARS THERE WAS TO REALLY CUT BACK ON OUR REPLACEMENT SCHEDULE FOR VEHICLES.

AGAIN TWO YEARS AGO, WITH THE 20 ADDITIONAL PERSONNEL THAT YOU ALL APPROVED FOR US WE PURCHASED 12 THAT YEAR, TEN NEXT YEAR, THIS YEAR SEVEN, BUT WE ALSO REPLACED SEVERAL NONAMBULANCE VEHICLES.

SOME OF OUR UNITS THAT YOU'LL SEE OUT HERE IN THE PLAZA, THEY CALL THEM A SQUAD, MARKED SUVs, EVEN THOUGH BELIEVE IT OR NOT THEY WERE STILL RUNNING IT'S NOT JUST WORTH THE MONEY TO PUT INTO THEM TO KEEP THEM GOING.

WE REPLACED MAYBE ABOUT NINE NON-AMBULANCE VEHICLES THIS YEAR AND WE'LL GO TO REPLACE AMBULANCES NEXT YEAR INCLUDING A NEW BEAR YACHT TRICK UNIT THAT HAS THE HEAVY -- BARIATRIC UNIT, THAT HAS THE HEAVY LIFT TON BACK.

WE YUF OF UTILIZE THE ONE WE -- UTILIZE THE ONE WE HAVE NOW SEVERAL TIMES WEEK.

WE'RE REPLACING OUR MATERIALS MANAGEMENT, TWO VANS, TWO TRUCKS THAT THEY USE TO DELIVER SUPPLIES TO OUR STATION AND BRING BACK DIRTY EQUIPMENT IN NEED OF CLEANING.

THOSE VEHICLES ARE OLD AS WELL. WE'RE TRYING TO DO UPGRADES ACROSS THE BOARD AND WE'VE HAD GREAT SUPPORT.

>> FINALLY, GREAT TO SEE, LAST QUESTION.

THE TRAINING ACADEMY WHERE IS THAT GOING TO BE LOCATED?

>> THAT'S BEING DETERMINED.

I WOULD SAY THAT -- TWO YEARS AGO IT WAS \$50,000 WAS APPROVED FOR A STUDY FOR AN EMS FACILITY IN THE SEA PORT AND \$50,000 FOR AN ACADEMY.

AND THEY -- I BELIEVE THEY TO

GET MORE BANG FOR THE BUCK I  
THINK THEY COMBINED IT WITH ONE  
PARTICULAR VESSED, I THINK IT  
WAS DHK.

THEY COMPLETED THEIR NEEDS  
ASSESSMENT AND STUDY AND  
RECOMMENDATIONS FOR THE SEA PORT  
AND IT IS AWAITING FURTHER  
ACTION.

FOR TRAINING ACADEMY THEY  
COMPLETED THEIR NEEDS  
ASSESSMENT, SQUARE FOOTAGE WHAT  
DO WE NEED AS FAR AS LOCKER  
SPACE, OFFICE SPACE, WORKOUT  
FACILITIES AS SUCH AND THEY  
STARTED DOING FIT TESTING FOR  
CITY PROPERTIES ONE OF WHICH  
INCLUDED THE SECOND FLOOR ON THE  
RIVERLAWN STREET IN WEST ROX  
TREAT, DPL HAS HOLDINGS OUT  
THERE.

>> BY THE PARK?

>> YES ONE OF THE SITES WE WERE  
LOOKING AT.

AND MY UNDERSTANDING IS THE  
MONEY THEY WERE PUTTING IN THERE  
NOW WAS GOING TO BE FOR DESIGN.

>> SO MULTIYEARS OFF FROM THIS  
BUT GLAD TO SEE THAT THIS  
ADMINISTRATION BECAUSE OF YOUR  
ADVOCACY IS PUSHING THIS.

IT IS HIGH TIME THAT WE HAVE A  
DEDICATED EMS TRAINING FACILITY.  
LOVE TO SEE IT IN DISTRICT 6.

>> THANK YOU.

OUR EXPERIENCE HERE IS WHEN  
THEY'VE DONE A STUDY AND SIMILAR  
TO WHEN YOU BUILT THE MATTAPAN  
GARAGE FOR US RIGHT?

THERE WAS A STUDY AND THERE WAS  
A DESIGN PHASE WHICH IS THE NEXT  
YEAR.

>> YES.

>> AND THE NEXT YEAR THEY VOTED  
ON FUNDING THE CONSTRUCTION.  
SO IT ACTUALLY WENT PRETTY  
QUICK.

AND THAT TYPE OF THING.

WE WERE MOVING IN THERE IN THREE  
YEARS FROM INCEPTION.

>> GREAT JOB, GREAT IMPROVEMENT  
IN THE CARDIAC ARREST STATS,  
THANK YOU FOR ALL YOU DO  
EVERYBODY IN YOUR TEAM.

>> CHIEF I JUST WANTED TO ADD I  
DON'T THINK WE NEED A STUDY TO  
KNOW THAT WE NEED AN EXTRA  
GARAGE IN AUSTIN-BRIGHTEN.  
BRIGHTON.  
>> THANK YOU.  
>> WE'VE BEEN JOINED BY CITY  
COUNCIL AT LARGE MICHAEL  
FLAHERTY.  
CHAIR RECOGNIZES COUNCILOR  
CAMPBELL.  
>> THANK YOU MR. CHAIR.  
YOU GUYS DO AMAZING WORK.  
I WANTED TO START WITH THANK  
YOU.  
JUST ECHOING COUNCILOR  
O'MALLEY'S STATEMENT, YOU DO  
PHENOMENAL WORK AND ANYTHING WE  
CAN DO TO SUPPORT YOU.  
JUST A QUICK QUESTION ON WHEN  
I'M HAPPY TO SEE THE INCREASE IN  
THE FULL TIME EMPLOYEES FTES,  
GOING THE FACT THE POPULATION IS  
GOING UP FROM WHAT WE'RE SEEING  
FROM THE 2030 PLAN, YOUR  
DIFFERENCE BETWEEN THE SERVICE  
POPULATION AND THE RESIDENTS WHO  
LIVE HERE, WHAT WOULD YOUR IDEAL  
BUDGET LOOK LIKE IN TERMS OF HOW  
MANY FULL TIME EMPLOYEES WOULD  
IDEALLY BE ADEQUATE BASED ON  
WHERE WE'RE GOING IN POPULATION  
SIZE INCREASES, WHAT WOULD YOUR  
EQUIPMENT LOOK LIKE?  
OBVIOUSLY EVERY DEPARTMENT  
DOESN'T ALWAYS GET WHAT THEY  
WANT BUT IT'S IMPORTANT FOR US  
TO HAVE A SENSE OF WHAT DOES EMC  
NEED?  
I THINK FOR -- EMS NEED?  
THERE'S A GAP, WE OFTEN TALK  
ABOUT THAT THE POLICE DEPARTMENT  
NEEDING MORE OFFICERS AND I'M  
CURIOUS WHAT YOU THINK CHIEF  
WHAT YOU THINK THE NEED IS AND  
WHERE THERE MIGHT BE A GAP.  
AND THIS IS ALL POSITIVE  
QUESTIONING.  
YOU KNOW?  
>> YEP, OKAY.  
THANK YOU, COUNCILOR.  
AGAIN, WE HAVE TO LOOK AT AS WE  
GO, WE SAW THAT WE ORIGINALLY ON  
THE TWO ADDITIONAL DAYS AND

EVENINGS, WE SAW SOME  
IMPROVEMENT NINRL WHERE WE  
CAME -- INITIALLY WHERE WE CAME  
DOWN ABOUT 30 SECONDS ON OUR  
CITYWIDE PRIORITY 1 MEDIAN  
RESPONSE TIME.

.BUT THEN AS CALL VOLUME  
INCREASED OVER THE NEXT TWO  
YEARS AND IN REVIEWING MORE THE  
TYPES OF CALLS WE'RE GETTING  
WHERE WE'RE DOING MORE  
PROBLEM-SOLVE ON STREET CORNERS,  
WHAT THE POLICE ARE DOING IT  
ISN'T ALWAYS LIKE YOU GET THERE  
AND SOMEBODY'S GOT A BROKEN LEG  
AND YOU PATCH THEM UP AND MAKE  
THEM FEEL BETTER AND TAKE CARE  
OF THEIR NEEDS AND TRANSFER THEM  
TO THE HOSPITAL.

SOME OF THE CALLINGS YOU GET A  
LITTLE MORE COMPLICATED, TRYING  
TO SORT OUT WHAT'S REALLY GOING  
ON AND SOME OF THE OTHER ISSUES  
THAT ARE OUT THERE.

WE -- THOSE GAINS WERE ERODED,  
THOSE RESPONSE TIMES.

THEY START SLIPPING BACK DOWN.  
WE DID COME IN AND WE MET WITH  
THE MAYOR'S BUDGET OFFICE AND WE  
MET WITH -- AND OBVIOUSLY WITH  
THE FULL SUPPORT OF PUBLIC  
HEALTH, WE SHOWED THAT WE HAD  
FURTHER NEED AND WE WERE TRYING  
THIS OTHER APPROACH WITH THE  
COMMUNITY ASSISTANCE TEAM TO TRY  
TO MECHANIC -- MANAGE AROUND THE  
EDGES, THE PROBLEMS WE WERE  
GETTING AROUND THE INCREASED,  
GETTING THE RIGHT UNIT TO THE  
RIGHT TRUCK TO THE RIGHT TIME.  
AND WITH THAT, I DO BELIEVE  
THERE'S REALLY A WAY TO DEVELOP  
A FORMULA SO WE CAN SEE AND  
PROJECT THAT SO WE CAN SEE WHAT  
THE NEEDS ARE GOING TO BE.  
NOT JUST IN DIFFERENT  
NEIGHBORHOODS BUT CITYWIDE.  
WHAT DO WE NEED TO CAN FOR  
GROWTH?

WHAT -- WHAT DO WE NEED TO DO  
FOR GROWTH?

WHAT DO WE NEED TO DO, FOR THE  
DEMANDS RELATIVE TO AGE,  
PEDIATRIC POPULATION, THE

ELDERLY POPULATION?

THERE'S A LOT OF OPPORTUNITY  
THERE FOR US TO COME UP WITH  
SOME BTL PLANNING FOR US AS WE  
HEAD TOWARDS 2030 SO WE WILL  
KNOW.

AND ALSO, WE'VE GOTTEN BACK TO  
OUR REPLACEMENT SCHEDULE FOR  
AMBULANCES BUT WE WANT TO LOOK  
AT OUR OTHER EQUIPMENT, OUR  
STRETCHERS, THE POWER-LIFT  
STRETCHERS NOW, THEY COST MORE  
THAN THE FIRST COUPLE OF CARS I  
BOUGHT MYSELF.

ALL THAT STUFF HAS SHELF LIFE.  
THE IDEA OF GETTING ON PROGRAM  
REPLACEMENT SCHEDULES SO THAT  
WE'RE NOT SUDDENLY HAVING TO  
COME BACK LOOKING FOR A LARGE  
AMOUNT OF MONEY TO REPLACE AGING  
INFRASTRUCTURE.

WHAT WE'RE TRYING TO DO IS  
ACROSS ALL OF THAT, ALL AREAS OF  
OUR DEPARTMENT, TO COME UP WITH  
BETTER WAYS OF DOING THAT.

AND IT MIGHT HELP MORE TO ANSWER  
YOUR QUESTION AND TO INFORM  
FUTURE YEARS AS WE GO AHEAD.

>> THAT WOULD BE HELPFUL IN  
TERMS OF JUST I'LL TURN THIS  
INTO AN INFORMATION REQUEST POST  
THIS HEARING WHAT THAT FORMULA  
MIGHT LOOK LIKE.

JUST WHAT YOU JUST EXPLAINED  
SORT OF IN WRITING, WHAT THAT  
MIGHT LOOK LIKE GOING FORWARD,  
FIVE, TEN YEARS OUT.

BECAUSE I THINK THAT MIGHT  
INFORM FOR US, WHAT THE LONG  
TERM FUTURE LOOKS LIKE AND WHERE  
THE GAPS ARE AND WHERE WE CAN BE  
GREAT ADVOCATES ON BEHALF OF YOU  
AND YOUR TEAM.

>> THANK YOU.

>> I ALSO WANT TO THANK YOU GUYS  
AND WE WILL HAVE HEARINGS COMING  
UP RELATED TO THIS, FOR THE WORK  
ON GETTING THE DATA FOR THE  
HEARING ORDER, RELATED TO THE  
PUBLIC SAFETY AGENCIES DOING  
THIS IN COUNCILLOR McCARTHY  
CHIEF, THANK YOU FOR BEING  
EXTREMELY RESPONSIVE, LAURA, WE  
ALWAYS SEE THAT BELIEVE IT OR

NOT GETTING INTO THE DETAILS ON THE WEEDS.

I APPRECIATE THE EDITS, THE BACK AND FORTH'S, LOOK FORWARD TO YOU GUYS PARTICIPATING AND LAURA YOU AS WELL, YOU MIGHT HAVE MORE TIME THAN THE CHIEF, RUNNING AROUND ALL OVER THE CITY BUT LOOK FORWARD TO YOU GUYS PARTICIPATING IN THESE CONVERSATIONS AND COMING UP WITH MORE SHORT TERM AND LONG TERM INITIATIVES TO GO BETTER WITH RESPECT TO THE NUMBERS AND THOSE FOLKS OF COLOR THAT WE WERE TALKING ABOUT.

I ALSO WANT TO APPLAUD YOUR EFFORTS WITH THE WORKFORCE DEVELOPMENT TEAM, TRENDS TEAM, THAT EMT PROGRAM, THE CADS -- CADET PROGRAM, IT'S FANTASTIC, SOME PEOPLE DON'T EVEN KNOW IT EXISTS.

I'VE BEEN TELLING THEM ABOUT IT. THINKING OUTSIDE THE BOX FOR HOW YOU CAN CHANGE THESE NUMBERS, FOR PARTICULARLY OUR CITY RESIDENTS, I THINK IT'S INNOVATIVE AND I HOPE TO BE ABLE TO COME UP WITH MORE IDEAS, NOT JUST WITH RESPECT TO EMS BUT ALSO OTHER PUBLIC SAFETY AGENCIES, OTHER THINGS THAT ARE WITHIN OUR CHROME AND OTHER THINGS AMIGHT HAVE TO CHANGE WITH RESPECT TO THE STATE. WHO KNOWS.

BUT I THINK WE CAN DO A LOT MORE AND YOU GUYS ARE DEMONSTRATING THAT.

MY LAST QUESTION, JUST TO BE MINDFUL OF OTHER PEOPLE'S TIME. WITH THE PROGRAM NOW, LAURA YOU WERE TALKING ABOUT RIGHT NOW I THINK THERE ARE 30 STARTING IN AUGUST, 300 PEOPLE THAT APPLIED, 100 WERE INTERVIEWED, THERE ARE 30 THAT ARE EXPECTED TO START IN AUGUST.

>> WHAT WE ASK THEM TO DO IS ACTUALLY FOLLOW A PREEMPLOYMENT SCREENING PROCESS.

>> OKAY.

>> SO THE NEXT STEP IS THEY WILL

ACTUALLY DO A PHYSICAL EXAM AND AN APTITUDE TEST.

THE APTITUDE IS THE NORMAL HIRING PROCESS BUT THIS IS TO SEE IF THEY ARE PREPARED TO TAKE THE EMT CLASS.

AFTER THAT THEY'RE THINKING BETWEEN 25 TO 30 PEOPLE WILL BECOME ELIGIBLE TO TAKE THE EMT CLASS.

>> GOT IT.

DO WE KNOW THE DEMOGRAPHICS OF THESE FOLKS RIGHT NOW?

>> NO.

SO THEY AREN'T SPECIFICALLY RECRUITING THROUGHOUT THE CITY. AND LOOKING FOR ENHANCING DIVERSITY, INCLUDING RACE, DIVERSITY AND LANGUAGE CAPACITY.

>> AND WOMEN?

>> AND GENDER TOO.

>> AND GENDER TOO.

I'LL BE INTERESTED IN WHAT THE DEMOGRAPHICS ULTIMATELY BECOME FOR THAT GROUP.

I KNOW FOR THE CADET DEPARTMENT BPD THEY FOLLOW THAT, MAKING SURE IT'S MORE WOMEN AND PEOPLE OF COLOR WHEN DOING THIS WORK WHICH IS IMPORTANT.

THANK YOU GUYS FOR WORK YOU'RE DOING.

THANK YOU FOR PARTNERSHIP, THANK YOU FOR YOUR INCREDIBLE TEAM, SOME OF WHOM ARE SITTING IN THE BACK AND NOT ON TV.

BUT THANK YOU FOR BE THE MEN AND WOMEN WHO DO THE WORK ON THE GROUND EVERY SINGLE DAY.

REALLY APPRECIATE YOU.

>> COUNCILOR ESSAIBI-GEORGE.

>> THANK YOU, MR. CHAIR.

JUST TO FOLLOW UP ON COUNCILOR CAMPBELL'S QUESTIONS ON THE ACADEMY.

THAT IS PRESET BEFORE THE BOSTON EMS ACADEMY?

>> CORRECT, THAT'S TO FACILITATE YOUNG PEOPLE GETTING -- BECOMING CERTIFIED AS AN EMT WHICH IS A DAUNTING THING FOR SOME PEOPLE.

AND SOME PEOPLE JUST

FINANCIALLY, HOPING FOR SOME

OTHERS MAYBE THEY'VE BEEN OUT OF

SCHOOL FOR A LITTLE BIT AND THEY NEED A LITTLE TUTORIAL BRUSH UP. >> AND THEN THEY COULD QUALIFY TO ENTER THE REGULAR EMT, YOU OAR REGULAR CLASS?

>> OH YES, YEAH, THAT WAS THE MOST ATTRACTIVE THING TO THE MAYOR'S OFFICE OF WORKFORCE DEVELOPMENT WAS THEY SAID THAT HEY, YOU'RE TELLING US THERE'S ACTUALLY A JOB MAYBE WAITING AT THE END OF THIS, AND THEY'RE SAYING ABSOLUTELY.

WE'RE AVERAGING TWO RECRUIT CLASSES A YEAR TO KEEP UP WITH THE TIME AND HOPEFULLY WITH MORE EXPANSION LIKE WE'RE EXPERIENCING NOW.

SO THE NEED HAS BEEN THERE. AND OUR POOL OF APPLICANTS HAS BEEN DECREASING THE LAST FEW YEARS.

WE USED TO HAVE MAYBE 290 PEOPLE SIGN UP TO TAKE OUR EXAM, AND AFTER THEY WENT THROUGH WRITTEN AND THE PRACTICAL WE'D BE INTERVIEWING 66 PEOPLE FOR 20 POSITIONS.

RIGHT NOW WE'RE INTERVIEWING I BELIEVE 30 PEOPLE THIS WEEK FOR 24 POSITIONS.

SO IT'S -- THAT'S A LITTLE BIT DISCOURAGING.

SO WE WANT TO GET MORE PERSONNEL IN.

>> AND THEN WHAT'S THE \$750 COST FOR?

IS THAT FOR THE CITY ACADEMY OR IS THAT FOR --

>> SO THAT'S OUR BOSTON EMS-EMT CLASS.

SO PRIOR TO THE CITY ACADEMY'S INVOLVEMENT WE'RE POSTING A DATE, WE RUN A EMT CLASS, TUESDAY, THURSDAY AND EVERY OTHER SATURDAY FOR NEXT FOUR MONTHS SAY.

YOU COULD SIGN UP AND BEHAVIORAL IT WAS AND BASICALLY IT WAS YOU GOT PAID, IN FULL, YOU GET A SEAT.

>> THE INDIVIDUAL SIGNED UP OR THE THAT CLASS COULD WORK FOR APRIVATE, NOT FOR BOSTON EMS,

BUT SOME OF THE PRIVATE AGENCIES  
THIS RUN AN EMS CLASS?

>> THAT'S CORRECT.

SOMEBODY WHO WANTS TO TAKE AN  
EMT CLASS, THEY COULD SAY THAT'S  
CHEAPER THAN BUNKER HILL.

THE REASON WE KEPT IT AFFORDABLE  
IS WE WANTED TO TAKE CARE OF OUR  
FOLKS IN THE CITY.

WORKFORCE DEVELOPMENT HAVE TO BE  
RESIDENTS TO QUALIFY FOR THAT  
PROGRAM AND TO BENEFIT.

AND THERE'S NOTHING SAYING THAT  
GOING FORWARD EVEN PEOPLE WHO  
DON'T QUALIFY FOR THAT PROGRAM,  
IT'S ENCOURAGING TO SEE AS MANY  
PEOPLE PUT IN FOR IT, IF THEY'RE  
CITY RESIDENTS, THERE'S NO  
REASON THEY CAN'T APPLY FOR US.  
AND WE'LL SEE WHAT WE CAN DO TO  
HELP THEM AS WELL.

>> THE REGULAR ACADEMY HOW MUCH  
DOES IT COST TO TRAIN AN EMT,  
JUST TO PUT SOMEONE THROUGH YOUR  
SCHOOL THROUGH YOUR ACADEMY,  
WHAT'S THE INVESTMENT THAT WE'RE  
MAKING?

>> WOULD I HAVE TO PULL THAT NIM -- I WOULD HAVE TO PULL THAT  
NUMBER TO GET IT FOR YOU.

>> CURIOUS WHAT WE'RE INVESTING.

>> FOR EXAMPLE, THE EXAMINATION,  
IT'S THE PRESCREENING, IT  
INCLUDES -- THERE'S MINIMAL COST  
TO THE TESTING BECAUSE WE HAVE  
TO STAFF THAT WITH PERSONNEL.  
BUT ONCE YOU'RE SELECTED THEN  
YOU GO TO YOUR MEDICAL EXAMS,  
YOUR DRUG SCREENING, ALL THAT,  
THAT ALL ADDS UP.

AND THEN ONCE YOU'RE HIRED, YOU  
GIVE THEM A STARTER SET OF  
UNIFORMS AND PERSONAL PROTECTIVE  
EQUIPMENT AND THEN OF COURSE YOU  
PAY THEM, OUR RECRUITS GET PAID  
AND THERE'S TRAINING OFFICERS.  
SO IT IS SEVERAL THOUSAND  
DOLLARS PER STUDENT, JUST TO GET  
THEM THROUGH THE FIRST THREE  
MONTHS AND THEN ONCE THEY'RE ON  
THE FIELD, FIRST SIX MONTHS, WE  
HAVE PEOPLE WE HAVE TO BRING IN  
AS TRAINING OFFICERS FOR THEM  
WHICH OFTEN RESULTS IN THEM  
BEING BACK FILLED ON OVERTIME.

SO THERE ARE COSTS.

WE DO MAKE A SIGNIFICANT INVESTMENT.

THAT'S WHY WE DO TRY TO GET EVERYBODY THROUGH.

AAND WE HOPE TO KEEP THEM.

>> YOU MENTIONED EQUIPMENT.

THIS CAME UP, I WAS LOOK AT MY NOTES FROM LAST YEAR, SOME OF THE PERSONAL SORT OF PROTECTIVE EQUIPMENT THAT OUR EMTS DONE HAVE AS PART OF THEIR REGULAR UNIFORM.

CAN YOU TALK A LITTLE BIT ABOUT THE NEEDS, OF OUR EMTS, YOU'VE GOT YOUR BIG YELLOW JACKET ON AND OFTEN YOU COULD BE GOING INTO A CRISIS EVENT THAT CAN BE DANGEROUS FOR OUR FIRST RESPONDERS.

CAN YOU TALK A LITTLE BIT ABOUT THE PROTECTIVE GEAR THAT YOU MAY NEED FOR YOUR EMTS?

>> SURE.

THE OUTER GEAR IS OBVIOUSLY MEANT FOR WEATHER, RAIN, WHATEVER STORMS, THERE'S DIFFERENT LINERS, MOSTLY ENVIRONMENTAL, RIGHT? FOR STORMS, BLIZZARDS.

THEN YOU HAVE HELMETS ISSUED FOR ROUTINE STAND BYES, WHERE WE ARE WORRIED ABOUT BREAKING GLASS OR THINGS COMING DOWN FOR YOU, MOTOR VEHICLE ACCIDENT OR A BUS THAT'S ON ITS SIDE, WE ISSUE BOOTS, GLOVES, IT'S NOT REALLY TURNOUT GEAR IN THE SENSE OF FIRE TURNOUT GEAR BUT IT IS HIGH QUALITY, ONE THAT HAS QUILTED LINING IN IT, IT DOES PROTECT YOU AROUND GLASS, CUTTING, IF YOU ARE OPERATING IN A DANGEROUS SCENE, IT HAS A AMENDMENT BRAIN ON IT THAT PROTECTS YOU FROM BLOOD BORN PATHOGENS.

WE ISSUE GLOVES, MASKS, WE FIT TEST YOU TO MAKE SURE WHAT SIZE YOU SHOULD BE WEARING.

IT PROTECTS YOU IN FLU SEASON, IF YOU ARE WORRIED ABOUT SOME SORT OF RELEASE OR WORRIED ABOUT AN INFECTIOUS DISEASE.

WE ISSUE THE NAVY 2,000 PIECE

WHICH WE CAN PUT A CANISTER ON,  
FILTER OUT RIOT AGENTS,  
DANGEROUS CHEMICALS SUCH AS  
NERVE AGENTS, AND WE TRAIN  
INDIVIDUALS AND A SAFE PROCEDURE  
FOR PUTTING IT ON.

WE DO PROVIDE PERSONAL BODY  
ARMOR TO ALL OF OUR PERSONNEL,  
EVEN THE RECRUITS ONCE THEY COME  
IN WE SIZE THEM AND WE START THE  
ORDER THERE.

BECAUSE IT TAKES A LITTLE BIT TO  
HAVE THOSE SETS OF BODY ARMOR  
MANUFACTURED.

THEY'RE TYPICALLY GOOD FOR AT  
LEAST FIVE YEARS AND THAT'S  
WHETHER THE BODIES THAT CERTIFY  
THEM RECOMMEND THAT WE CHANGE  
THEM OUT.

SO ABOUT EVERY YEAR WE'RE CHANGE  
OUT ABOUT A THIRD OF OUR  
PERSONAL ISSUE BODY ARMOR.

THAT BODY ARMOR WE ISSUE RIGHT  
NOW IS NOT THE SAME AS WHAT YOU  
WOULD SEE THE SWAT OFFICERS,  
SOMETHING SIMILAR TO WHAT THE  
PATROLMAN ON THE BEAT HAS.

UNDERNEATH THEIR UNIFORM SHIRT  
OR IF THEY PREFER THEY CAN WEAR  
IT IN AN OUTER CARRIER.

WE ISSUE IT TO PERSONNEL.

THEY ARE NOT REQUIRED TO WEAR IT  
ROUTINELY.

BUT MANY DO, AND IN CERTAIN  
SITUATIONS WHERE THEY CERTAINLY  
WILL ASSISTING THE POLICE WITH  
SOME OPERATIONS.

IN A RESPONSE TO A LOT OF  
CONCERNS AFTER WHAT WE SAW AT  
LAS VEGAS, THE PULSE NIGHT CLUB  
OR PLACES WHERE LONG GUNS ARE  
BEING USED FOR MASS SHOOTINGS IN  
URBAN AREAS, THERE WAS A LOT OF  
CONCERNS THAT THE BODY ARMOR  
THAT WE ISSUED AND FRANKLY WHAT  
ARE ISSUED TO PATROLMEN ISN'T  
ADEQUATE TO STOP MILITARY GRADE  
ROUNDS LIKE THAT.

WHEN YOU SEIZE M-4'S OR AK 47'S  
IN USE, THE UNION RAISED A LOT  
OF CONCERNS ABOUT THAT AND WE  
CERTAINLY WANTED TO BE ABLE TO  
PROTECT THEM IN THOSE  
SITUATIONS.

WE GOT APPROVAL FROM THE EXECUTIVE OFFICE OF PUBLIC HEALTH TO EXPEND \$100,000 THIS FISCAL YEAR AND WE HAVE PLACED IN ORDER, WE DO EXPECT TO GET IT IN THIS MONTH, A NUMBER OF SETS OF HIGHER LEVEL BODY ARMOR. THE HIGHER-LEVEL STUFF IS HEAVIER, WOULD BE WARN OVER YOUR OTHER EQUIPMENT.

AND SO INSTEAD OF THAT BEING PERSONALLY ISSUED, OUR PLAN IS TO PUT COMPLETE SETS, A COUPLE OF COMPLETE SETS IN EVERY UNIT. AND ALSO HAVE THE SUPERVISORS IN OUR SPECIAL RESPONSE UNITS TO SCARE EXTRA SETS AS WELL.

ALONG THAT IS THE KEVLAR UNIT FROM THAT TYPED OF ROUND.

NOW HAVING SAID THAT THAT'S NOT BECAUSE I EXPECT OUR PERSONNEL TO BE THE FIRST ONES THROUGH THE DOOR WHEN SOMEONE'S FIRING A SEMI AUTOMATIC RIFLE, WE ARE PUTTING IT OUT LIKE PPE, WE'VE SEEN IT AROUND THE WORLD, SOMETIMES THE HOT ZONE COMES TO YOU.

THE FOLKS IN PARIS WE BROUGHT OVER HERE WE TALKED TO, THEY WEREN'T ANTICIPATING WHAT THEY IS A AT THE TIME BATACLAN NIGHT CLUB THERE WHEN EVERYBODY GOT PINNED DOWN THERE.

POLICE UNITS TO COME IN TO ARE ABLE TO COMBAT THAT TYPE OF FIRE POWER.

EVEN IF YOU'RE IN THE VICINITY YOU WANT TO HAVE THE BEST LEVEL OF PROTECTION AVAILABLE.

OUR GOAL IS TO PLACE IT IN THE AMBULANCES, REALLY BY THE END OF THIS FISCAL YEAR, WE DO EXPECT TO HAVE IT IN.

SO WE'LL BE ABLE TO BASICALLY GRAB IT OFF THE SHELF IF WE HAVE TO GO TO THAT LEVEL OF PROTECTION.

BUT AGAIN, ANY TRAINING ABOUT HOW WE WOULD BE UNDER THE PROTECTION OF THE BOSTON POLICE DEPARTMENT.

>> GREAT, THANK YOU CHIEF.

>> THANK YOU.

AND WE'VE BEEN JOINED BY COUNCIL  
LYDIA EDWARDS.

COUNCILOR BAKER HAS THE FLOOR.

>> THANK YOU MR. CHAIR.

CHIEF DID YOU KNOW WE WOULD BE  
SCHEDULING THIS DURING EMS WEEK?  
THAT'S PRETTY GOOD PLANNING ON  
YOUR PART.

>> IT SEEMS TO HAPPEN EVERY  
YEAR.

>> TRAINING FACILITY AND OTHER  
FACILITIES, CAN YOU TALK ABOUT,  
DIG IN A LITTLE MORE, THE BET  
TEAM AND BPD.

WHAT IS YOUR ROLE THERE?

I MEAN I DON'T KNOW YOUR ROLE  
WHEN YOU SHOW UP ON THE SCENE  
BUT ONCE A PERSON THAT YOU HAVE  
THE PERSON NOT IN CUSTODY BUTTER  
IN YOUR AMBULANCE -- BUT IN YOUR  
AMBULANCE OR WHATEVER, CAN YOU  
TALK ABOUT THOSE INTERACTION HE  
A LITTLE BIT?

>> -- INTERACTIONS A LITTLE  
BIT?

>> SURELY.

IF THEY'RE A DISTURBED PERSON  
AND HAVE A DIAGNOSED MENTAL  
ILLNESS, MAYBE THE FAMILY IS  
CALLING BECAUSE THEIR  
19-YEAR-OLD SON REFUSES TO TAKE  
HIS MEDICATION, HE'S ACTING OUT,  
THERE ISN'T MUCH THAT EMTS  
WORKING IN A SERVICE UNIT CAN DO  
OTHER THAN TRANSPORT THEM TO AN  
EMERGENCY ROOM.

>> TRANSPORT AND NOTIFY THE BEST  
TEAM, HOW DOES THAT INTERACTION  
ARE HAPPEN?

MAYBE WHAT I'M ASKING.

>> SURE.

ABSENT THEM, WE WOULD HAVE TO  
CONVINCE THEM TO GO IF WE  
THOUGHT THAT THEY WERE  
EXHIBITING SIGNS THAT THEY WERE  
EITHER OUT OF CONTROL OR THEY  
HAD ISSUES THAT THEY COULD BE A  
THREAT TO THEMSELVES OR OTHERS.  
WE REALLY TRY TO GET THEM TO GO.

>> TO GO TO THE HOSPITAL?

>> WE HAVE TO TRANSPORT.

RIGHT NOW WE CAN ONLY TRANSPORT  
TO EMERGENCY ROOMS.

LIKE WE CAN'T TRANSPORT EVEN TO

A PSYCHIATRIC FACILITY RITE NOW.  
THAT'S NOT THE WAY -- RIGHT NOW.  
THAT'S NOT THE WAY EMERGENCY  
SERVICES ARE PERMITTED IN THIS  
STATE.

SOMEONE IS BEING TRANSFERRED  
FROM SAY BOSTON MEDICAL CENTER  
TO A PSYCHIATRIC FACILITY,  
SOMEBODY WILL BE TRANSPORTED BY  
A PRIVATE AMBULANCE COMPANY,  
MAYBE IF THEY'VE BEEN CLEARED OR  
WHAT HAVE YOU.

OUR OPTION HE ARE THE EMERGENCY  
ROOM.

WITH THE BEST BEST TEAM, AND  
WITH THE ABILITY OF THEM, THERE  
IS A COUPLE OF DIFFERENT THINGS.  
ONE, THEY MAY BE ABLE -- THEY  
CAN TAKE SOMEBODY.

WITH THE POLICE TO A DIFFERENT  
FACILITY.

ESPECIALLY IF IT'S SOME PLACE  
WHERE IT'S APPROPRIATE FOR THEM  
TO GO TO.

WHERE THEY'RE NOT GOING TO BE  
BROUGHT THERE AND THAT FACILITY  
IS GOING TO IMMEDIATELY SAY WE  
DON'T WANT TO SEE THIS GUY UNTIL  
HE'S MEDICALLY CLEARED.

WHICH MEANS THEY'LL WANT US TO  
TAKE THEM TO THE HOSPITAL OR THE  
BEST TEAM HAS MUCH MORE TRAINING  
TO DEAL WITH PSYCHIATRIC  
INCIDENTS.

MAYBE THEY TAKE THEM ALONG WITH  
THE POLICE AS WELL.

ALSO ONE OF OUR HOMES IS THAT  
THAT MAY BE ABLE TO HELP US WITH  
SITUATIONS WHERE WE WOULDN'T  
HAVE TO RELY ON TAKING SOMEBODY  
AGAINST THEIR WILL, FORCIBLY  
RESTRAINING THEM TO DO THAT.

I MEAN -- RESTRAINING THEM TO DO  
THAT.

THAT'S THE LEAST ENJOYABLE PART  
OF OUR JOB.

SOMETIMES WE HAVE TO DO IT.  
BUT THE IDEA WAS IF SOMETIMES IF  
YOU HAVE MAYBE A CLINICIAN WHO'S  
BETTER OFF AT HANDLING THAT OR  
TO GIVE THAT A TRY.

SO TO THIS POINT IT'S BEEN  
MOSTLY MAKING OUR PEOPLE AWARE  
THAT THAT ASSET IS OUT THERE.

FOR THE LONGEST TIME ONE OFFICER  
IN THE EVENING SHIFT OF B-2.  
YOUR CHANCE HE OF GETTING THAT  
UNIT AVAILABLE TO ASSIST YOU WAS  
PRETTY RARE.

NOW THAT THEY'RE WORKING MORE  
SHIFTS, MORE HOURS, WE'RE  
STARTING TO SEE THEM IN  
DIFFERENT PARTS OF THE CITY, WE  
CAN -- BECAUSE OUR DISPATCH IS  
CO-LOCATED WITH POLICE DISPATCH,  
WE CAN ASK THEM DO YOU HAVE A  
UNIT WITH THE BEST TEAM ON?

>> WHEN THAT UNIT COMES IN?

>> WE CAN MAYBE GET THIS PERSON  
TO GO OR WE GET THERE AND WE  
FIND A PERSON WHO IS COMPETENT,  
THEY DON'T SEEM UNDER THE  
INFLUENCE OR IMPACTED BY  
ANYTHING AND THEY MEET THE  
CRITERIA TO BE ABLE TO REFUSE  
TRANSPORT.

BUT THE FAMILY IS INSISTING  
SOMETHING ELSE IS GOING ON AND  
WE REALLY WANT TO TRY TO GET  
THIS GUY TO GO TO THE HOSPITAL.  
THE BEST TEAM CAN COME IN, THEY  
HAVE THE LEGAL AUTHORITY TO  
ISSUE AN EMERGENCY SECTION 12  
AND 13.

AND WE'VE USED THAT --

>> THOSE ARE FOR MENTAL ILLNESS  
SECTION 12?

>> FOR MENTAL ILLNESS YEAH, OR  
JUST FOR -- NOT JUST THAT.

IF WE GET SOMEBODY WHEN IT'S 4°  
OUT LIVING ON THE STREET DOESN'T  
WANT TO GO, BUT THEY'RE  
COMPETENT, ILLEGAL THEY CAN --  
LEGALLY THEY CAN REFUSE.

SOMETIMES WE'VE NOTIFIED THE  
BEST TEAM EVEN BEFORE THEY'RE  
WITH THE POLICE AND THEY'LL COME  
IN AND THEY CAN TAKE THEM TO THE  
SECTION WHERE IT'S A LITTLE  
EASIER TO FORCE THE PERSON TO  
GO.

>> ARE YOU INVOLVED IN SECTION  
35s AT ALL?

>> NOT DIRECTLY.

I KNOW THAT'S BEING DONE WITH  
THE SPECIALTY COURT.

ANOTHER TOOL TO TRY GET PEOPLE  
INTO TREATMENT, TRY KEEP THEM

ALIVE LONG ENOUGH AND HOPEFULLY,  
MOVE ON TO LIKE THERE  
TRANSITIONAL OR SUPPORTIVE CARE.  
>> WHAT, SECTION TWREL --  
>> SECTION 12.  
>> 12 IS THE EMERGENCY ONE, THEY  
USED TO CALL IT THE PINK PAPER.  
THAT COSH FOR EMERGENCY  
HOSPITALIZATION, COULD BE FOR  
MENTAL ILLNESS, COULD BE FOR  
SUBSTANCE.  
COULD BE FOR SOMEBODY THEY FIND,  
MAYBE A CRAZY HOARDER SITUATION  
WHERE -- BUT THERE'S NO FOOD AND  
THE PERSON'S WHERE LIKE THEY'VE  
BEEN WE GOT TO GET YOU TO SOME  
PLACE, IT'S NOT HEALTHY HERE, I  
DON'T WANT TO GET INTO THE  
DETAILS.  
>> OKAY KIND OF ALONG THOSE SAME  
LINES IT'S TALKING ABOUT HUMAN  
TRAFFICING AND HOW EMC INTERACTS  
WITH PEOPLE WHO ARE BEING  
TRAFFICKED.  
CAN YOU EXPLAIN TO ME A BIT  
ABOUT MAYBE WHERE THAT'S  
HAPPENING OR WHAT DO YOU DO IN  
THAT SITUATION, WHEN YOU'VE  
IDENTIFIED SOMEONE WHO HAS BEEN  
TRAFFICKED, WHAT DOES EMS HAVE  
AVAILABLE TO YOU?  
>> WHAT'S AVAILABLE NOW IS  
CERTAINLY TO RAISE OUR AWARENESS  
OF IT AND THE POTENTIAL IT IT  
AND THE FACT THAT IT COULD BE  
YOUNGER PERSONS, OLDER PERSONS,  
A LOT OF PEOPLE WHO MAYBE RECENT  
IMMIGRANTS OR MAYBE AFRAID TO GO  
TO AUTHORITIES OR AFRAID THAT IF  
I REPORT THIS OR EVEN COMPLAIN  
ABOUT THIS I COULD BE PUTTING  
MYSELF ON POTENTIAL HOT SEAT TO  
GET DETAINED OR DEPORTED.  
OR MAYBE SOMEBODY WHO'S  
CONTROLLING THEM, TRAFFICING  
THEM IS GIVING THEM THAT  
IMPRESSION HOLDING THAT OVER  
THEM TO KEEP THEM QUIET.  
WE DO CALLS EVERYWHERE, WHETHER  
IT'S IN SHELTERS, HOTELS,  
SUBWAYS, PRIVATE HOMES AND ONE  
IS TO RECOGNIZE THAT THAT COULD  
BE HAPPENING ANYWHERE, WHETHER  
IT'S FORCED SERVITUDE --

>> AROUND YOUR PEOPLE ARE  
TRAINED OIDENTIFY --  
>> WE GIVE THEM TRAINING TO  
IDENTIFY THAT BUT ALSO EVEN  
TRAINING TO SUSPECT IT, TO BE A  
LITTLE BIT SUSPICIOUS.  
WHETHER AGAIN CHILD ABUSE OR  
ELDER NEGLECT.  
YOU KNOW, THAT'S SOMEWHAT  
ENGRAINED IN THE PEOPLE TO LOOK  
FOR THAT.  
YOU GO TO AN APARTMENT AND  
THERE'S A BUNCH OF LITTLE KIDS  
RUNNING AROUND, THE SCREENS ARE  
DOWN, HE SOFAS IS UP AGAINST,  
WOULD YOU LIKE SOMEBODY TO SEE  
YOU?  
THAT'S BEEN SO ENGRAINED ON OUR  
PEOPLE, THEY ROUTINELY LOOK FOR  
THAT.  
TO SUSPECT THE HUMAN TRAFFICING  
IS OUT THERE.  
AND THAT WE -- IF WE SUSPECTED  
IT ALL, WE CAN REPORT IT TO THE  
HOSPITAL, HOPEFULLY TO MAKE IT  
SAFE BUT ALSO TO REPORT IT TO  
LAW ENFORCEMENT.  
>> OKAY, AND LAST QUESTION,  
CHIEF, IF YOU CAN EXPLAIN TO ME  
A LITTLE BIT ABOUT YOUR CHARGE  
BACK SYSTEM, HOW DOES THAT  
HAPPEN?  
SO DO WE CHARGE INSURANCE  
COMPANIES, DO WE CHARGE MASS  
HEALTH, DO WE DO THAT OPERATION  
IN HOUSE?  
MAYBE THIS IS A QUESTION FOR YOU  
LAURA I DON'T KNOW.  
IF YOU CAN ANSWER.  
>> SURE WE CAN TANDEM IT TOO.  
BUT WE DO BILL FOR OUR SERVICES,  
OUR TRANSPORT, SIMILAR AS I  
THINK EVERY LICENSED AMBULANCE  
SERVICE IN THE COMMONWEALTH.  
OR IF IT'S A MUNICIPAL POLICE OR  
FIRE BASED, I DO BELIEVE THEY  
WILL DO IT.  
I MEAN SOME RURAL PARTS OF NEW  
ENGLAND, THEY HAVE VOLUNTEER  
SYSTEMS BUT EVEN THINGS THERE  
THEY HAVE SUBSCRIBER FEES.  
>> IF YOU ARE OUT ON A REGULAR  
RUN, DO YOU LIKE -- YOU'RE NOT  
SUBMITTING AN INVOICE TO THE

CITY OF BOSTON ARE YOU?  
THAT'S JUST PART OF OUR  
OPERATING COST.

>> OH NO NO NO NO NO.

WE BASICALLY BILL THE PATIENTS.  
AND BY SAYING WE BILL THE  
PATIENTS, IN MOTION CASES IT IS  
THEIR -- IN MOST CASES IT IS  
THEIR INSURANCE.

WE CONTRACT OUT WITH A PRIVATE  
COMPANY.

>> WHO DOES THE BILLING?

>> WHO DOES THE MEDICAL BILLING  
WHICH IS COMPLICATED, TRYING TO  
MAKE SURE WE ARE MEETING ALL THE  
HIPAA REQUIREMENTS, MAKE SURE  
WE'RE IN CONFORMANCE WHERE ALL  
THE CMS BILLING CODES AND  
INSURANCE REQUIREMENTS.

SO IS THERE A GAP BETWEEN OUR  
BILLING AND YOUR COST, WHAT IS  
THE GAP?

>> SURE, THIS YEAR IT'S GOING TO  
BE IN ORDER OF -- NOT JUST  
BILLING BUT THE PROJECTED COST  
FOR OUR BUDGET THIS YEAR IS  
ABOUT \$57 MILLION.

AND THAT WOULD CALL FOR A  
SUBSIDY FROM THE INTOF ABOUT  
EAFN --

>> WHAT IS THE NUMBER FOR WHAT  
WE ACTUALLY GET REIMBURSED FROM  
MASS HEALTH AND PRIVATE  
INSURANCE COMPANIES?

>> WE ANTICIPATE THIS YEAR THAT  
IT'S THIRK --

>> I THINK IT'S 37.

37 MILLION, CHIEF.

>> 37 MILLION, THANKS AGAIN.

>> THANK YOU CHIEF FOR  
EVERYTHING YOU AND YOUR PEOPLE  
DO FOR THE INTOFLT.

THE CITY OF BOSTON.>> THANK YOU, COUNSELOR FLYNN.

>> THANK YOU, MR. CHAIR, WE HAVE  
THE BEST CMS SYSTEM, THANK YOU  
CHIEF, AND TO LAURA AS WELL.

I HAD A COUPLE OF QUESTIONS.  
I KNOW YOU TALKED ABOUT THE  
SUCCESS OF THE EMT, CERTIFIED  
EMT PROGRAM.

AND YOU SAID THE COST WAS ABOUT  
\$700 FOR SOMEONE TO TAKE THAT  
COURSE.

>> YES, I BELIEVE IT'S ABOUT

\$750 NOW, AND BOOKS.

>> IF SOMEONE DOESN'T HAVE THE MONEY FOR THE COURSE, ARE THERE ANY OPTIONS FOR THAT PERSON TO STILL TAKE THE COURSE?

THEY MIGHT WANT TO BE AN EMS  
THEY MIGHT WANT TO BE IN THIS FIELD BUT CERTAINLY WE WOULDN'T WANT \$700 TO BE THE REASON THAT THEY COULDN'T GET INTO THIS FIELD.

IS THERE ANY OTHER OPTIONS FOR SOME DEDICATED YOUNG PERSON THAT WANTS TO REALLY BE CERTIFIED?

>> WELL, UP UNTIL NOW, THERE REALLY WASN'T.

BECAUSE WE WERE CONVAIND THAT WE HAVE TO PAY OUR INSTRUCTORS, AND PAY THE STATE EXAMINERS WHEN THEY COME IN, TO CONDUCT THE EXAMINATION.

AND WE HAVE TO BUY BOOKS.

AND WE DO CONSUME SOME MATERIALS WHEN THEY DO TRAINING.

SO IT WAS KIND OF DIFFICULT TO DO THAT.

WE USED TO -- YOU GIVE PEOPLE TIME TO MAKE A DOWN PAYMENT, THEY COME IN.

BUT BEFORE THE CLASS STARTED IN ORDER TO ENSURE THE SEAT.

WITH THE PROGRAM THAT THE CITY IS SPONSORING FOR US, UP TO 30 PEOPLE, THAT TUITION WOULD BE COMPLETELY PAID FOR BY THEM.

WHICH IS TERRIFIC.

WE'VE HAD -- I MENTIONED EARLIER, THE UNION THAT REPRESENTS THE EMTS, THE BPMA EMS DIVISION, THEY HAVE SPONSORED, DIFFERENT GROUPS HAVE APPROACHED THEM AND THEY'VE SPONSORED A SCHOLARSHIP.

OTHER PEOPLE HAVE COME FORWARD AND SAID, I'D LIKE TO DONATE, WHICH WOULD BE IF, WE DIRECT THAT, MAYBE SUGGEST TO SPONSOR SOMEBODY.

EVERY NOW AND THEN WE WOULD USE THAT TO HELP OUT SOMEBODY.

BUT THIS TINT WE HAVE NOW WITH THE OFFICE OF WORKFORCE DEVELOPMENT IS A WELCOME ADDITION.

>> THANK YOU CHIEF.

I HAD THE OPPORTUNITY DURING THE ANTIGUN VIOLENCE GATHERING, TO TOUR THE TRUCK THAT WAS OFF OF BOSTON COMMON.

CAN YOU GIF ME A LITTLE BIT OF BACKGROUND OF THE COMMAND CENTER?

I KNOW YOU HAVE ONE AT THE BOSTON MARATHON.

BUT WHAT KIND OF SERVICES WOULD THAT COMMAND CENTER PLAY?

>> SURE.

COMMAND POST, COMMAND CENTERS ARE, ONE, DIRECTING OPERATIONS AT A PARTICULAR EVENT, AND ALSO, FOR COORDINATING RESOURCES, AT A PARTICULAR EVENT.

THE VEHICLES THAT YOU'RE SPEAKING OF THERE, HAD DUAL PURPOSE THAT DAY.

IT'S A -- A MAB, MOBILE AMBULANCE BUS, THAT WAS PURCHASED WITH FEDERAL UASI DOLLARS, THROUGH OEM, WE SPEC SPEC'D THAT OUT SEVERALTY YEARS AGO.

SEVERAL YEARS AGO.

WE HAD THE ABILITY TO RATCHET DOWN AND SECURE TO THE FLOOR MULTIPLE PATIENTS AND WHEELCHAIRS.

THAT GIVES YOU THE ABILITY TO, IF WE HAD TO EVACUATE SAY A SKILLED NURSING FACILITY, OR IF THERE WAS AN EMERGENT EVACUATION WHERE WE HAD TO TRANSFER LARGE GROUPS OF PERSONS OR REDISTRIBUTE THEM BEYOND THE REGION, I GET THEM OUT OF BOSTON, BRING THEM SOMEWHERE ELSE.

BUT WE'VE USED IT ON EVENTS WHERE WE'VE HAD MULTIPLE PEOPLE, RIGHT NOW, WITH SAY MINOR COMPLAINTS, WHERE WE GET THEM OUT OF YELLENIS, WE HAVE MEDICAL EQUIPMENT, WE CAN DO EKG'S ON THEM AND PRIORITIZE THEM FOR TRANSPORT.

ONE OF THE BUSIEST EVENTS, BELIEVE IT OR NOT WE USED THEM FOR, TWO YEARS AGO WHEN THE PATRIOTS HAD THE SUPER BOWL CELEBRATION, IT WAS PARKED IN

THE BACK OF THIS BUILDING.  
PROBABLY THE WORST KEPT SECRET  
WAS THAT THE PLAYERS WOULD HANG  
AROUND CITY HALL.  
WE HAD A PRETTY GOOD CROWD OF  
MOSTLY INTOXICATED UNDERAGED  
PEOPLE, YOU HAVE TO CHECK THEM  
OUT FOR HEAD INJURIES OR COLD  
INGESTION AND THINGS LIKE THAT.  
THAT BECAME A MOBILE CLINIC, WE  
DECIDED WHO COULD BE DISCHARGED,  
WHO COULD BE TRANSPORTED, WHO  
COULD BE REUNITED WITH FAMILY.  
AGAIN THAT SAVED TRANSPORTS TO  
SOME HOSPITALS BUT IT ALSO  
HELPED US WITH BEING ABLE TO  
TRIAGE -- PATIENTS AND EAST  
BOSTON HYDE PARK, THAT HELPED US  
MANAGE THAT CASELOAD THAT DAY.  
>> CHIEF, I KNOW THAT IN SOME OF  
THE DOCUMENTS, AS IT RELATES TO  
THE EMS STATION STUDY, THE STUDY  
IS UNDERWAY THE SOUTH BOSTON SEA  
PORT, CAN YOU GIVE US A LITTLE  
BACKGROUND INFORMATION ON THAT  
MEES?  
>> YES, COUNCILOR.  
WE HAD MADE A REQUEST OF THE  
CITY SEVERAL YEARS AGO.  
BECAUSE WHEN THE SEA PORT  
DISTRICT OR BACK THE CITY CALLS  
IT THE INVOCATION AREA, RIGHT?  
-- INNOVATION AREA RIGHT?  
IT'S MORE HISTORICAL GROWTH  
ACROSS THE CITY THE LAST SEVERAL  
YEARS.  
ABOUT 14 YEERLINGS E-YEARS AGO,  
UNTIL -- 14 YEARS AGO, WE COULD  
HELP ON THE SEA PORT WHEN WE  
FIRST.  
>> LOOKING BACK IN 2003.  
>> YES FROM 2003 UNTIL A COUPLE  
OF YEARS AGO, YOU'RE A RESIDENT  
COUNCIL SO YOU KNOW.  
IT WAS A GHOST TOWN AT NIGHT.  
EVERYONE KNOWS WHAT IT'S  
DEVELOPED INTO NOW.  
BUT EVEN 2003 ON WE STARTED TO  
SEE DOUBLE DIGITSD GROWTH IN  
CALLS DOWN THERE.  
-- DOUBLE DIGIT GROWTH IN CALLS  
DOWN THERE.  
DOUBLE DIGIT DEMAND FOR SERVICES  
DOWN THERE.

ONE WAS TO TRY GET EXTRA TRUCKS  
ON WHICH WE DID.  
BUT ANOTHER ONE WAS LIKE WE WERE  
TRYING TO GET A STATION DOWN IN  
THERE SOMEWHERE.  
SO WE HAD APPROACHED THE CITY  
ABOUT IT.  
AND I KNOW NOW BRA, NOW THE  
BPDA, AND OTHERS HAD THAT ON  
THEIR RADAR.  
WHAT THE CITY DID TWO YEARS AGO  
IS, THEY FUNDINGED A STUDY TO DO  
A NEEDS ASSESSMENT.  
THEY STARTED LOOK AT VARIOUS  
POSSIBILITIES DOWN THERE.  
ONE WAS TO BUILD A STATION  
SOLELY FOR EMS ON A PIECE OF  
EXISTING CITY PROPERTY DOWN  
THERE.  
ANOTHER WAS TO BUILD IT IN  
CONJUNCTION WITH MAYBE OTHER  
AGENCIES, POLICE, FIRE,  
TRANSPORTATION, SIMILAR TO  
WHAT'S GOING ON IN EAST BOSTON,  
EAGLE SQUARE.  
THEY SCOPED OUT POTENTIAL WAYS  
TO DO IT.  
BUT BEYOND THAT THEY ALSO LOOKED  
AT SEVERAL OTHER CITIES WHERE IT  
WAS DONE PART OF PRIVATE  
DEVELOPMENT, WHERE IF SOMEBODY  
IS BUILDING AN OFFICE BUILDING  
OR MIXED USE OR WHATEVER, THEY  
WOULD STAY A CORNER OF ONE FLOOR  
AND PUT A FIRE BAY IN THERE OR  
TWO AMBULANCE BAYS IN THERE.  
WHAT THEY DID IN THIS STUDY WAS,  
THEY TRIED TO COME UP WITH  
ESTIMATES OF WHAT SOME OF THAT  
WOULD COAST AND SHOW BEST-CASE,  
BEST CASES OR THE WHAT THAT'S  
LOOKED LIKE IN OTHER CITIES.  
AND PRESENTED THAT BACK TO  
PROPERTY MANAGEMENT FOR THE  
CITY.  
SO HOPEFULLY, GIVE DIRECTION  
WHAT'S THE BEST WAY TO GO,  
WHAT'S THE BEST BANG FOR THE  
BUCK, WHAT'S MOST EFFICIENT  
GOING FORWARD.  
>> RIGHT, I SEE THE BUILDING  
THERE, DON SHEFARO'S BUILDING  
WITH THE EMS PRESENCE THERE.  
I DO AGREE WITH YOU, I AM

CONCERNED DOWN IN THE SOUTH  
BOSTON WATERFRONT WITH THE HIGH  
VOLUME OF TRAFFIC, I'D LOVE  
EVENTUALLY TO SEE A POLICE,  
FIRE, EMS STATE-OF-THE-ART  
BUILDING THERE, THAT YOU KNOW,  
AS YOU MENTIONED, THE  
NEIGHBORHOOD'S GROWING SO FAST  
AND I AM CONCERNED IF THERE WAS  
A PUBLIC SAFETY PROBLEM OR  
HAZARD, THAT IT WOULD BE  
DIFFICULT FOR US FIRST  
RESPONDERS TO GET IN THERE.  
BUT MY LONG TERM PLAN IS TO SEE  
A POLICE, FIRE, MAJOR PRESENCE  
IN THAT AREA AS WELL.  
BUT AGAIN I JUST WANTED TO SAY,  
CHIEF, THANK YOU FOR YOUR  
LEADERSHIP FOR SO MANY YEARS IN  
THE CITY, WE'RE PROUD TO HAVE  
YOU AND YOU'RE DOING AN  
EXCELLENT JOB.  
>> THANK YOU COUNCILOR.  
>> THANK YOU, COUNCILLOR  
McCARTHY.  
>> THANK YOU MR. CHAIR, CHIEF,  
STAFF, WELCOME EVERYBODY.  
I'VE ALWAYS BEEN A TREMENDOUS  
FAN OF THE MEN AND WOMEN IN  
BROWN SO IT DOESN'T REALLY GO AS  
A SHOCK THAT I'M GOING TO TELL  
YOU CONGRATULATIONS ON YET  
CONTINUING JUST A STELLAR  
REPUTATION FOR YOURSELF,  
OBVIOUSLY CHIEF, BUT YOUR ENTIRE  
STAFF AND EVERY MAN AND WAIT A  
MOMENT WHO WORK FOR YOU.  
YOU'RE AN INCREDIBLE BENEFIT TO  
THE CITY OF BOSTON.  
I HAVE A COUPLE OF QUESTIONS, A  
LOT OF THE QUESTIONS I HAVE ARE  
ALONG LOCATIONS AND OPERATIONS,  
KIND OF THE BACKGROUND I HAVE  
NAIP.  
MY CONCERN FOR YOU, WE'VE TALKED  
ABOUT THIS, I TALK ABOUT IT WITH  
COMMISSIONER EVANS, AS WELL AS  
COMMISSIONER FINN.  
THE BIGGEST THING WE GET AT THE  
CITY COUNCIL ARE TRAFFIC GETION.  
CONGESTION.  
WE HAD A HEARING, LAST WEEK,  
ABOUT CONCURRENT JURISDICTION,  
AS YOU'RE WELL AWARE OF, IS

THERE A STREEP IN PLACE OF WHERE -- STRATEGIC PLAN IN PLACE  
OF WHERE WE SHOULD BE REGARDING  
RESPONSE TIMES AND THINGS LIKE  
THAT?

>> CURRENTLY, I WOULDN'T SAY  
THERE'S A UPDATED STRATEGIC  
PLAN.

BUT WE DID SEVERAL YEAR AGO,  
WHEN WE DID UPDATE IT, WITH THE  
CHANGE OF ADMINISTRATIONS AS  
WELL, WHERE WEE MADE  
RECOMMENDATIONS FOR WHERE WE  
WOULD LIKE TO SEE GARAGES,  
STATIONS WHERE WE COULD MOVE OUR  
TRUCKS OUT OF.

AND YOU KNOW THEY'RE BUSY SO  
MOST MUCH THEM AREN'T GOING BACK  
SITTING THERE AND WATCHING THE  
CELTICS PLAYOFF GAME THERE.  
THEY'RE USUALLY OUT SOMEWHERE  
ELSE AND TRYING TO CLEAR OUT OF  
THE HOSPITAL.

AND WE'RE GRABBING THEM, THE  
HYDE PARK TRUCK, THEY COME OUT  
AROUND NOW WE MOVE SOMEBODY OUT  
TO COVER THEM IN THE MEANTIME.  
BUT AT LEAST THEY GET HIDE PARK  
STATION, MAYBE GET IN GET OUT OF  
THE RAIN, USE THE FACILITIES,  
BECAUSE ANYBODY WHO LAST ACCESS  
TO THE STATIONS, USING A CARD  
KEYED SYSTEM.

SO HAVING THAT STATION OUT IN  
HYDE PARK WAS A BIG THING.  
WHEN I WORKED OUT THAT WAY ON  
ONE OF OUR BALANCE THAT CHANGED  
OUT OF CROSSING OLD BOSTON CITY  
HOSPITAL OUR GARAGE THEN, WHICH  
IS NOW HEARLT FOR THE  
HOMELESS -- HEALTH CARE FOR THE  
HOMELESS, YOU PARKED OUTSIDE OF  
THE POLICE STATION AND YOU COULD  
PARK THERE IF YOU WANTED TO GET  
OUT OF THE TRUCK.

THERE'S BEEN IMPROVEMENTS BUT  
IT'S NOT EVERYWHERE.

ONE OF THE PLACES WE MADE A  
RECOMMENDATION WAS CERTAINLY THE  
SEA PORT, ANOTHER ONE WE MADE  
RECOMMENDATIONS AND HARVARD'S  
MASTER PLAN FOR DEVELOPING WHAT  
THEY'RE DOING OVER THERE TO  
INCLUDE SOME SORT OF GARAGE OR  
FACILITY FOR EMC IN PRIETON.

BECAUSE RIGHT NOW, WE WERE --  
BRIGHTON, BASICALLY WE WERE A  
TENANT AT WILL.  
WE ARE RENTING OFF MCDONALD WAY,  
WE HAVE TWO AMBULANCES OUT OF  
THERE, WE STORE DISASTER  
EQUIPMENT FOR PUBLIC  
PREPAREDNESS.  
IF IT'S GOING TO BE IN WHATEVER  
BUILDING WE'LL PROBABLY GET SOME  
SUFFICIENT NOTICE BUT PROBABLY  
NOT ENOUGH OR A PLACE TO GO.  
SO WE DO HAVE ALL THOSE NEEDS  
DOCUMENTED AS FAR AS -- BUT THEY  
COULD PROBABLY BE UPDATED.  
ROSLINDALE IS PROBABLY ANOTHER  
ONE, COUNCIL, MATTAPAN AND THEY  
TRAVEL BACK TO ROSLINDALE.  
WHICH IS -- IT HELPS.  
BUT THAT SHIFT CHANGE TIME OF  
DAY THEY'RE MOVING BACK AND  
FORTH SIMILAR TO OUR BALANCE 12  
WHICH IS A ZONE IMPACT TRUCK,  
NORMALLY POSTED AROUND FRANKLIN  
PARK, BACK WHERE PARKS IS INSIDE  
FRANKLIN PARK, ANYWHERE WE MIGHT  
JUMP ON WHERE ANOTHER CITY  
DEPARTMENT IS BUILDING, THERE'S  
JUST MORE ECONOMIES OF SCALE TO  
JUMP IN, WHETHER SOMEBODY  
ELSE -- WHEN SOMEBODY SELLS  
BUILDING, BECAUSE FREE STANDING  
COST OF BUILDING.  
BUT CITY SERVICES THERE, SIMILAR  
TO WHEN YOU LINKED UP TO DPW,  
WHEN THEY BUILT THE FACILITY IN  
FIELDS CORNER IN DORCHESTER,  
THAT'S STOOD THE TEST OF TIME,  
PAYING GOOD BECAUSE WE HAVE  
CONNECTIONS DAY LINES SO THEY  
CAN PULL DIRECTLY OVER FROM THE  
STATION.  
>> DIRECTLY TO SNOW OPERATIONS  
HAVE A LOT OF FRIENDS OVER THERE  
AND I KNOW THAT JUST THE FACT  
THAT YOU SAID RENT BEING FROM  
HARD OF, THERE ARE A LOT OF  
LINES INCLUDING MY TWO  
COLLEAGUES THAT ARE HERE,  
COUNCILOR ESSAIBI-GEORGE IS  
DOING A HEARING IN A COUPLE OF  
WEEKS TO FIGURE OUT, THAT IS A  
WHOLE 'NOTHER CAN OF WORMS.  
MY LAST WE IS KIND OF A SILLY

ONE, THEY HAD THE POWERPOINT WHICH IS FAIRLY FUNNY, SHOWING A LOT OF THE OLD PICTURES WITH GUYS WITH GIANT FLOWS AND MUSE MUSTACHES.

I WALKED OUT OF THERE THINKING WHAT'S THE --

>> UNFORTUNATELY IT WAS WASN'T THAT OLD.

IT WAS SOME -- AFTER THE LATE '90s WE GOT AWAY FROM THE ENORMOUS BOMPLES THAT WERE MOUNTED ON PICKUP TRUCK FRAMES. BECAUSE SOME OF THEM WE WERE LUCKY TO HAVE TWO YOARS OUT OF. WE HAD FRAMES CRACKING, WE PUNISHED THEM A LITTLE BIT, ON CITY STREETS, DRIVING AROUND. AND THE TRUCKS WERE HEAVY, THEY COVERED A LOT OF EQUIPMENT. AND SEEMED TO BE WHITE GEW UNDER, WHEN YOU TOOK THEM OFF OF THE FACTORY FLOOR, WITH SUSPENSIONS AND TRANSMISSIONS AND WHAT NOT, THE CHEVY 4500 GMC WHICH PROVED TO BE A DEPENDABLE PLATFORM FOR US, THE BRAKES WOULD LAST WAY BETTER BECAUSE THEY'RE THE SAME TYPE OF TRUCK YOU WOULD PUT A DUMP TRUCK ON OR SOMETHING ELSE ON.

SO THE COOLING, THE ENGINE, THE TRANSMISSION, THE BRAKES, EVERYTHING HELD UP MUCH BHERT. IT WAS HEAVY-DUTY.

UNFORTUNATELY, THEY TEND TO RIDE LIKE A DUMP TRUCK.

AND SO WHAT WE HAD TO DO, TO -- WE WENT TO DIFFERENT ITERATIONS OVER THE YEARS WITH DIFFERENT SUSPENSIONS TO ALL THE RIDES, AIR RIDES AND DIFFERENT ONES. SO WE WOULD GET A PROCUREMENT OF AMBULANCES IN AND WE WOULD FINALLY GET THE SUSPENSION THAT WE WANTED, AND THEN THE NEXT YEAR THEY'D STOP MAKING THAT LINE OF TRUCK OR SOMETHING ELSE. SO COUPLE OF YEARS AGO GM JUST JUMPED OUT OF LINE.

WE FINALLY GOT THE BUGS FIGURED OUT OF THAT MODEL.

WE WENT TO INTERNATIONAL, WHICH WAS ANOTHER MEDIUM DUTY STRUCK

WHICH WAS PROVED TO BE PRETTY UNFORGIVING FOR THE RIDE. NOT SO MUCH THE BACK, THE BACK TOO, BUT WE TOOK IT WITH THAT, WE TRIED TO GET THAT SQUARED AWAY. BUT THE CREATURE COMFORTS FOR CREW WHO WAS LIVING FOR IT, THAT WAS THEIR OFFICE IN BETWEEN CALLS. IT WAS PRETTY SPARTAN. FOLD-DOWN WINDOWS. NOT MUCH CREATURE COMFORTS AT ALL IN THERE. YOU CAN GO OUT NOW, THESE DAYS, AND BUY WHATEVER PICKUP TRUCK THAT RIDES LIKE A CADILLAC, THAT HAS IS MULTIPOSITION SEATS AND SO ALL THE BELLS AND WHISTLES AND FINALLY THE PICKUP TRUCKS DID CATCH ONE THAT. AND TWO YEARS AGO, WE DEVELOPED AN AMBULANCE WORKING GROUP WHERE E-WITH UNION MECH, MECHANICS, WE WOULD DO THE SPECS ALL OVER, AND WE COORDINATED OUT WITH THE A 450, HAS A THE TRUCKS WERE BIG BUT THE BOX WE PUT ON THEM IS ABOUT A FOOT LESS. SO TO FIT ON THAT, SO WE'VE DOWNSIZED THE BACK OF THE TRUCK A LITTLE BIT. WE WENT WITH A LIGHTER BOX AND FROM ALL, WE WENT WITH A, CALLED LIQUID SPRING SUSPENSION WHICH DUMPS DOWN A LITTLE BIT WHEN YOU OPEN THE DOORS.