



# **Alexandria Fire Department Policy Issues**

October 28, 2014

# City of Alexandria Strategic Plan

- Goal 6: The City protects the safety and security of its residents, businesses, employees and visitors.
- Key Outcomes:
  - Reduce harm to people and property from fire
  - Increase survivability from medical injuries and traumatic injuries
  - Reduce harm to people or property from disasters
  - Reduce harm to people and property from building failures
  - Achieve results that the community values

# Key Discussion Points

- How do we improve fire service delivery?
  - Improved Quality of Service
    - Locate, Assess, Treat and Transport the Sick/Injured to Care
    - Minimize Time for First Medical Contact of Patients
  - Improved Efficiency
    - Maximizing Existing Resource to Accomplish Better Service Outcomes

# Key Policy Questions

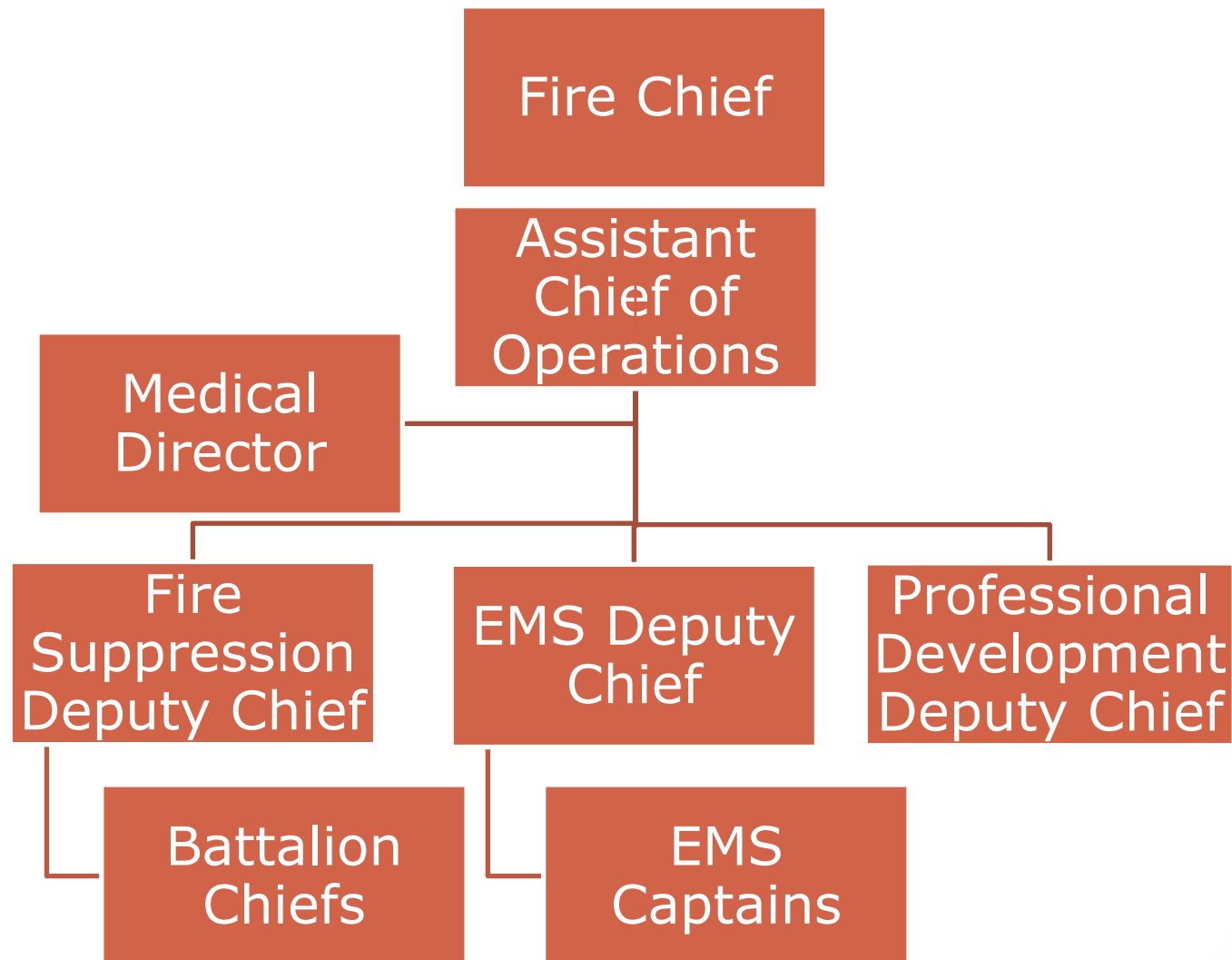
- Is the organization appropriately structured to effectively deliver the best quality service?
- Can a medic/firefighter dual-role approach yield service benefits?
- Can our infrastructure be better oriented to improve service?
- What is the optimal staffing arrangement for efficient service delivery?

Is the organization appropriately structured to effectively deliver the best quality service?

# Effectiveness: Executive Reorganization

- Eliminates 1 AFC and creates new rank of Deputy Chief (4 positions) who will help to implement plans proposed
- No new FTEs, cost savings of \$160,589 when fully implemented
- Moves EMS Supervisors to EMS Captains
  - Begins the process of dual-role providers

# Executive Reorganization





Can a medic/firefighter dual-role approach yield service benefits?



# Dual-role providers

- Dual-role providers, both Medic & Firefighter skills to staff any unit
- All personnel on the same 3 shift system
- Increase the number of ALS units from 6 to 16 units
- Allows for a Heavy Rescue Company (Special Operations)
- Provides 4-person staffing on all engines, ladders and heavy rescue company

# Dual-role providers

- No additional FTEs
  - Eventually moves EMS providers from four shift system to a three shift system
- Plan provides 4-person staffing on all engines, ladders & rescue company
- Plan provides staffing for an engine at Station 210
- Plan makes us comparable with surrounding jurisdictions

# Dual-role providers

- Evaluation in 2-3 years
  - How many existing employees have crossed over?
  - How has this impacted recruiting and hiring?
  - How has this impacted officer ranks?
  - How does it impact the benefits of the proposed plan forward?

# Dual-role providers

- Number of medics who have not transitioned will determine next steps in achieving the full strategy
- Can still continue to staff a Medic Unit as a single-role medic
  - Career advancement is eliminated
  - Station assignments will decrease

# Dual-role providers

Plan requires **all** 73 single-role EMS positions becoming cross-trained firefighters and moving them to 56 hour work week (3 shifts) before the full plan can be implemented

- There is a “limbo” period while single-role Medics remain in the system
- Schedules, operations, implementations and costs don’t have a defined answer right now because individuals have choice to switch and we don’t know how many will want to switch over from year to year
- Department will need to revisit where we are in 2-3 years to evaluate where we are and next steps

Can our infrastructure be better oriented  
to improve service?

# Station Location Study

- CIP includes \$47 million over the next ten years to repair/rebuild, stations 203, 205, 206, and 207.
- Additional \$13 million for station 211 (\$11 million from development contributions).
- Office of Performance Accountability will lead analysis with cross-departmental team that include GIS, General Services, etc.

# Station Location Study

- Four goals of the study:
  1. Identify areas of the City with the greatest need for fire and medic services
  2. Locate available and acquirable parcels of land in areas of high demand
  3. Develop a realistic model of AFD response
  4. Determine optimal level and placement of fire and medical resources to reach response time targets



What is the optimal staffing  
arrangement for efficient service  
delivery?

# Overhires

- Overhires are temporary positions who move into full-time positions when vacancies occur
  - Prepares for vacancies in the future by hiring for them now
- Newly hired recruits don't help with overtime for at least nine months from their date of hire
- By the time recruits are ready to staff units, new vacancies have occurred → always chasing the authorized number

# Overhires

- Department is always below the authorized position count
- Overhires require additional salary costs now to reduce overtime in the future
- Practice successful in the FY 14 budget
  - Saved \$600,000 of overtime

# Overhires

- Cost to add 12 permanent FTEs for one full year is \$1.0M
- Cost to add 12 overhires for one full year is \$0.6M
- Allows flexibility based on actual attrition
- Overhires **are not** permanent full-time positions
  - Different from SAFER grants which are permanent full-time positions

# Overhires

- Further costs will occur as we cross-train (EMS providers are pulled off the units for 8 weeks into a Fire School) → increases overtime costs
- A multi-year overhire strategy helps to address both existing and future OT issues
- Fire Department is preparing a proposal for overhires (FY 16 budget request)

# Key Decisions for City Council

- Direction to use FY 16 Budget process to provide further information on resources required to achieve required staffing levels



# Where are we trying to go?

TODAY'S STAFFING			DESIRED STAFFING	
	# of Units	# of personnel on each unit		# of personnel on each unit
Engines	8	3 or 4	9 (E210)*	4
Ladder Trucks	3	3	3	4
Battalion Aide	1	1	1	1
Battalion Chief	2	1	2	1
Heavy Rescue Company	1	0	1*	4
EMS Supervisor	2	1	2	1
Medic Units	6	2	6	2

\* All Engines & Heavy Rescue will have at least 1 Advanced Life Support (FF/Medic) assigned