

FIRE DEPARTMENT CITY OF MELROSE

OFFICE OF THE CHIEF

John J. White
Acting Chief of Department

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MEMORANDUM

Date: April 29, 2024

To: Mayor Jennifer Grigoraitis / City Council

From: Acting Chief John J. White Re: FY25 Fire Department Budget

Please identify any noteworthy changes or events that took place during FY24 in your department:

Staffing:

During fiscal year 2024, we had six department members who retired or transferred. Due to this loss, and already being low on workforce, we worked diligently to fill these vacancies. With these vacancies came many challenges to our department, one in particular being the utilization of forced overtime (holdovers) in order to maintain the level of service that the City is accustomed to. This national first responder staffing crisis has rocked many communities, and such issue can lead to staff mental and physical stress, recruitment/retention challenges, increased workloads, reduced resources, and strained community relations, just to name a few.

In March, the Chief of Department took a sudden leave of absence. On March 14, 2024, Fire Captain John White took the position of Acting Chief of Department. John White has served the Melrose Fire Department for 35+ years.

In April, the department hired three probationary firefighters, leaving the department with seven vacancies needing to be filled. With the contract being settled soon, we hope to entice more new hires to come aboard in the Melrose Fire Department.

Headquarters Renovation:

In the fall, our Headquarters fire station's 2nd floor received a highly necessary renovation. Such renovation was funded at \$150,000 by the State Earmark. Just prior to spring, the project was completed. The firefighters are extremely grateful for the safer conditions that this renovation has brought to their work and living space.

Do all of your department's salaries come from the same budget? If not, please identify the split among multiple budgets.

Of all 50 Fire Department employees, 42 are paid from our Fire Budget, and 8 are paid from our Ambulance Budget.

Are there any significant changes to your FY25 budget compared to previous years?

The only significant change to our FY25 budget would be the 5% cut to our overtime line. This is concerning for multiple reasons. Currently, we have seven vacant firefighter/paramedic positions, and with these vacancies comes the need for forced overtime (holdovers) as well as voluntarily filled overtime. Our department has had vacancies for the past 2 fiscal years, and in FY23, we spent \$809,000 on overtime, and so far in FY24, we have spent \$1,021,000. If we are unable to hire accordingly, we will be looking at an overspent overtime line in FY25.

(Note: Our department requested \$800,000 for FY25)

Any events or changes you anticipate in your department for FY25?

- Filling the 7 vacant firefighter/paramedic positions.
- Attracting/retaining first responders in the Fire/EMS field is a national issue in which
 Melrose has not been spared. Locally, this has meant a significant increase in overtime
 spending (both voluntary and forced) as we struggle to maintain the services we
 provide. To meet this challenge, the Fire Department is in the process of developing a
 multifaceted plan. To implement the plan, we are working with City Hall, Melrose Fire
 Local 1617, and the MA Office of Emergency Medical Services to respond to the Fire
 /EMS needs of our community and address the concerns of our firefighters.
 - o Strategy: Favorable settlement for both sides over current contract negotiations.
 - o Commitment of both sides to continue to provide ALS ambulance service.
 - o Agreement to drop to ALS/BLS model when it is necessary.
 - Continue to try to hire firefighters/paramedics. However, if none are available, hire firefighters/EMT-Bs, and send EMT-B to paramedic school (tuition ~ \$16,000).
 - o Provide training mandated by OEMS to make the transition to ALS/BLS model.
 - Assign both EMS Coordinator and Liaison positions (stipend positions) within the department.
 - Partnering with McNeilly EMS Training Company to provide third-party review of all medical responses for the Quality Assurance/Quality Improvement (QA/QI) program. McNeilly can provide a combination of videos and live training to maintain all required paramedic skills.
- Completion of the public safety radio system upgrade.
- Procuring the funds to replace our Engine 4 / 2010 Seagrave Pumper.
 - Production of a pumper, after the contract is signed, is approximately 18 months.
 - o This truck has frame rot which was temporarily repaired.
- Taking delivery of a new ambulance to replace our current 2010 Ford AEV.
 - An order was placed three years ago, but due to the current supply chain issues, it has been impossible to predict when the truck will arrive.
- Continue to actively engage with the City of Melrose community.
 - Due to the unsafe conditions of our current stations, we have been unable to host open houses. This upcoming summer, we would like to figure out a way to host a community event outside of one of the stations.

Highlight/outline the priorities, impacts, and changes reflected in your budgets, including any identified but unfunded needs for FY25.

There are two unfunded needs for FY25.

1. Hydration:

For many years, the Chief of the Fire Department has been voluntarily responsible for supplying daily drinking water to the firefighters, paying solely out of their own personal pocket. In the fall, the water dispenser at the Engine 3 fire station was found to have damaged threads that connected the filter to the dispenser, and the damage was beyond repair. This dispenser has yet to be replaced.

The physical effects of dehydration can lead to fever, dizziness, seizures, coma, or even death, and even a mild case of dehydration has been found to have negative cognitive effects as well. Dehydration is very common among firefighters, as they perform at physically high levels under adverse conditions.

We requested \$1,500.

2. EMS Devices:

These funds were requested to replace two EMS devices: 2014 Lucas and 2016 LifePak. Both devices are aged out and can no longer be serviced in the case that the devices fail or need maintenance.

The Lucas device is a mechanical chest compression device that assists first responders with delivering high-quality, guidelines-consistent chest compressions to sudden cardiac arrest patients.

The LifePak is a device that performs non-invasive defibrillation, cardiac monitoring, and 12-Lead ECG acquisition and interpretation. The device has six modes:

- AED Mode: for automated ECG analysis and a prompted treatment protocol for patients in cardiac arrest.
- <u>Manual Mode</u>: for performing manual defibrillation, synchronized cardioversion, noninvasive pacing, and ECG and vital sign monitoring.
- Archive Mode: for accessing stored patient information.
- Setup Mode: for changing default settings of the operating functions.
- Service Mode: for authorized personnel to perform diagnostic tests and calibrations.
- <u>Demo Mode</u>: for simulated waveforms and trend graphs for demonstration purposes.