

**UConn
HEALTH**



**Draft
Fire Department
Restructuring Plan**

May 2017

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1.0 EXECUTIVE SUMMARY

Due to internal and external financial pressures, and UConn Health's mandate to provide efficient and effective service on behalf of the state and taxpayers, UConn Health has decided to move to a more efficient model of fire service delivery while still ensuring the safety of its personnel, patients, students, visitors and facilities. After extensive planning and receiving input from stakeholders, an initial decision to close the full service fire department has been modified to one that retains the fire department with the following key modifications that yield savings of over \$1 million:

1. Consolidation with the University of Connecticut Fire Department:

The two independent fire departments maintained by the University of Connecticut will fully consolidate personnel, management, equipment and operations. The consolidation will be permanent and headed by one Fire Chief, based in Storrs.

2. Reduction in Full-Time Employees:

Reduction from 21 to 17 full-time employees (FTEs): All currently filled bargaining unit positions will be retained. Core emergency services offered specifically on the campus of UConn Health will remain; namely, fire response, EMS response (Advanced Life Support transport), hazmat response, and command/control of any outside resources called in to assist.

3. A Change in Maximum and Minimum Staffing:

Maximum staffing of four (4) firefighters per shift¹: A division of the UConn Fire Department will be assigned to UConn Health with seventeen (17) bargaining unit positions consisting of an Administrative Captain, and four (4) platoons of four (4) personnel each. Each platoon will be supervised by a Lieutenant.

Minimum staffing (in the event of vacations, sick calls etc.) of three (3) firefighters per shift²: Minimum staffing 24/7 at UConn Health will be one (1) officer, one (1) firefighter/paramedic, and one (1) firefighter/EMT. In the event of minimal staffing, response to certain calls will be supplemented by the municipal fire department.

4. A Change in Leadership Structure:

The UConn Health Fire Department will become a part of the UConn Fire Department and will be led by the Fire Chief, based in Storrs.

A Duty Officer system (On-Call Fire Officer) will ensure that a supervisory/command resource is available to respond or consult with the on-duty supervisors at either Storrs or UConn Health 24/7.

¹ Decreased from 5 per shift.

² Under the previous model, minimum and maximum staffing numbers were the same, creating a situation where overtime was required for any use of leave time.

5. Changes in Delivery of EMS (Ambulance) Services:

The EMS licenses for the UConn Health Fire Department and the UConn Fire Department will be combined under the procedures promulgated by the State Department of Public Health (DPH) Office of Emergency Medical Services. The Primary Service Area Responder (PSAR) assignment for the UConn Health campus will be retained to allow for the appropriate control over EMS service deployment on campus.

EMS calls on campus will be handled by the fire department personnel on duty who will respond with a paramedic ambulance. If, due to competing priorities, or skill mix of a platoon, less than two department personnel are available for an EMS response, mutual aid will be called to assist. The current ambulances will be retained by the UCFD to ensure sufficient vehicles to have a working ambulance at all times.

6. Expanded EMS Training:

Responders employed by UConn Health will have a minimum level of medical training. It is anticipated that all UConn Health Police Department (UCHPD) members (Police Officers) will be trained to at least the Emergency Medical Responder (EMR) level of care. It is expected that UCHPD will supplement the EMS response on campus.

7. Modest and Occasional Support from Outside Responders:

Mutual aid agreements will be codified with local Fire/EMS services to ensure that, in the event a full complement of UConn personnel is unavailable, other responders will collaborate with the UCFD to provide both fire response and all levels of the emergency medical services (first response through ALS transport).

8. Reduction in Response to Non-UConn Health Calls:

UConn Fire personnel will be focused and prioritized on emergency calls originating on the UConn Health campus. Requests to provide outside Fire/EMS assistance will require the direct approval of a UConn Fire Department supervisor.

9. Increased Involvement of UConn Health Employees such as Facilities and Police in Emergency Response Situations:

Campus-wide teams at UConn Health including a Hospital Environmental Response Team (HERT) and a Campus Response Team (CRT) will be implemented to provide initial or supplemental response to Hospital Areas and non-Hospital Areas, respectively, throughout the campus.

10. Expansion of Training and Operational Protocols:

A Training/Safety Officer position will oversee a comprehensive training and safety program for fire department staff at both Storrs and UConn Health.

Under this new model, focus will be placed on increasing the familiarity of outside responders with UConn Health operations, layout, and hazards. Operational protocols, coupled with the training and earlier initiation of outside resources, will be created to clearly delineate acceptable

actions of fire department members to provide rapid and efficient emergency response while ensuring the safety of firefighters. Non-emergency (routine) operations will be focused on meeting healthcare compliance mandates and preparedness by all staff (fire department and others) for emergency response.

Conclusion:

This plan will maintain the fire department and all existing bargaining unit personnel while achieving over \$1 million in savings and continuing to ensure UConn Health’s core focus of safety for our personnel, patients, students, visitors and facilities.

2.0 INTRODUCTION

2.1 UCONN HEALTH FIRE DEPARTMENT BACKGROUND

UConn Health is a division of the University of Connecticut. UConn Health comprises much of the University’s medical education, and research efforts, as well as its only acute care hospital.

The UConn Health campus is located at 263 Farmington Avenue in Farmington, CT and is comprised of an “Upper Campus” and a “Lower Campus.” The Upper Campus includes the Main building structure and while commonly identified as separate buildings such as the Clinic building, the Academic building, etc., all are physically interconnected. The Lower Campus consists of several freestanding buildings including, but not limited to, the Outpatient Pavilion, the Musculoskeletal Institute, and the Creative Child Care Center.

In this document, parking areas, roads and other areas outside of buildings but contained within the Farmington Avenue address are referred to as “Outside Areas.” When referred to collectively, Upper Campus, Lower Campus and Outside Areas are considered “On Campus.” Other UConn Health-owned/occupied buildings exist near the 263 Farmington Avenue address, such as 400 Farmington Avenue and 16 Munson Road, which are approximately ¼ mile from the Main building. For the purposes of this plan, these buildings and their associated exterior areas will be referred to as “Off Campus.”

Since the inception of UConn Health in the 1970s, it has continuously maintained an on-site fire department comprised of certified firefighters and their associated equipment. The primary purpose and function has always been to provide for fire and emergency medical response functions at the campus. However, the department has in the past maintained a regional intercept paramedic program and of late, a transport emergency medical service. The University of Connecticut in Storrs has, since the late 1800s, maintained an entirely separate fire department at its main campus and – except for a brief period between 2010 and 2013 – has been managed independently from UConn Health’s Fire Department.

Fire Service Structure & Delivery at UConn Health:

Currently, the UConn Health Fire Department (UCHFD) might best be described as the on-site subject matter experts in fire and emergency medical response. The service area for emergencies is primarily On Campus with some nuances to assist with Off Campus buildings. While reduced from previous years, UCHFD has provided mutual aid fire response to local areas. More frequently, UCHFD provides EMS mutual aid. Regardless, UCHFD personnel are trained in diverse types of emergency response (all-hazards), identification of emergencies, and deployment of an array of technical or tactical methods to resolve most incidents. They serve as the primary medical responder and ambulance transport unit On Campus, recently having

begun assisting with the transfer of patients out of UConn John Dempsey Hospital (JDH). When the needs exceed the capabilities of the on-duty staff for fire or EMS calls, fire department personnel determine the appropriate resources, summon them, and then are statutorily authorized to control the other resources once they arrive.

The current organizational structure of the Department is a Fire Chief, four (4) Captains, four (4) Lieutenants, seven (7) firefighters and five (5) vacant firefighter positions. The Fire Chief is a management (primarily administrative) employee and the sixteen (16) others, considered “line” personnel, are represented by a bargaining unit. Of the line personnel, nine (9) are licensed paramedics with medical control.

Line personnel are on rotating schedules and are organized into four (4) platoons, each supervised by a Captain and Lieutenant. Minimum staffing during weekdays is five (5) personnel (including one officer, i.e. either a Captain or a Lieutenant) and on nights/weekends is four personnel (including one officer). Minimum staffing is not enumerated in the collective bargaining agreement and is set by the Fire Chief. During a working shift, staff are generally assigned to a command vehicle (SUV), a fire engine and an ambulance; however, the dynamic nature of operations to handle On Campus, Off Campus, and mutual aid has staff deploying in other configurations based upon the emergency and/or availability.

2.2 Current Functions of UConn Health Fire Department

The main duties performed by the UConn Health Fire Department include:

- Fire safety inspections
 - Clinical areas
 - Equipment inspections & tests
- Hot work permits
- Fire watch (when necessary)
- Public education
 - Staff training
- Provision of Incident Command during emergency responses
- Supplementing Unified Command for non-emergency, multi-department or multi-agency responses
- Fire response and suppression*
- Hazmat response and mitigation*
- Technical rescue*
- EMS response and transport

** Denotes a function where confirmed incidents require additional outside resources and personnel.*

3.0 RESTRUCTURING PRINCIPLES & DETAILS

The restructuring elements in this plan have been tailored to comply with federal mandates (OSHA) while at the same time crafted to meet the general intent and guidance of industry standards such as those promulgated by the National Fire Protection Association (NFPA). The following provides additional insight into the principles applied to the restructuring concepts.

1. Staff Reductions - The elimination of vacant positions is aimed at “rightsizing” the fire department to achieve reasonable cost reductions while continuing to maintain the fire department and provide for the safety of the personnel, patients, students, visitors and facilities. The new staffing model incorporates modest support from the surrounding municipality much of which is already provided through mutual aid agreements.

2. Consolidation - Recently, UConn Health and University of Connecticut leadership have committed to centralizing select functions for efficiency, coordination and added-value under a “One UConn” philosophy. The centralization of the UConn Health Fire Department is anticipated to be permanent therefore providing all employees with stability, clarity for the future, and preserving recruitment and retention efforts.
3. Department Structure - Currently, a management employee (Chief Officer) handles administration and operations of the fire department at UConn Health. Under the new model, a bargaining unit Captain will supervise site-specific administrative and operational aspects under the guidance of a Chief Officer based in Storrs. The Captain may satisfy the minimum staffing needs for an officer thereby reducing automatic officer overtime as a result of accrued leave, whereas currently a Chief Officer (management) is not able to satisfy minimum staffing levels.

Under current conditions, a Captain and a Fire Lieutenant is assigned to each platoon. However, Lieutenants at UConn Health are permitted to be the only supervisor on duty. Under the new model, Fire Lieutenants will provide daily oversight of the line personnel assigned to platoons. This change merely propagates current conditions with more regularity. The Lieutenants will still report to a Captain during weekday hours, and after hours or in the absence of the Captain assigned to UConn Health, will have access to the Shift Commander (Captain) in Storrs, an On-Call Fire Officer, or if necessary, a Chief Officer.
4. Staffing - Under this plan, four (4) personnel will be assigned to each platoon with a three (3) person minimum (this includes one (1) officer, one (1) firefighter/paramedic, and one (1) firefighter/EMT). When this staffing configuration is used in conjunction with the Administrative Captain position (described above in 3. Department Structure), overtime will not be required every time that an employee uses time off. Additionally, this staffing plan allows for a more appropriate supervisor to firefighter ratio.
5. Fire/Hazmat Operations - A significant concept, important to all stakeholders, is the preservation of core emergency services offered On Campus. With a reduction in staffing, the methodology applied was to maintain responder safety by starting outside aid earlier, and to develop protocols (see Section 4) to allow immediate actions necessary to save life or prevent escalation of the emergency while at the same time controlling the initiation of actions that would violate federal mandates or industry best practices.
6. Emergency Medical Services (EMS) - As a healthcare facility, a core function of UCFD staff assigned to UConn Health will be the provision of EMS on campus. Staff currently possess the equipment and training necessary to provide paramedic-level service and a nominal amount of revenue can be collected from On Campus transports. However, providing Off Campus transfers from UConn John Dempsey Hospital removes the on-duty staff away from campus for significant periods, and will therefore be discontinued, excepting unusual or critical situations. The consolidation of fire department staff retains paramedic skill sets and equipment available for future use in the University enterprise. However, a key component to the sustainability of the paramedic-level of service is to ensure that staff are keeping up skills and practice. It is proposed that skills maintenance will be accomplished by having fire department paramedics assist the Emergency Department (ED) for scheduled periods of time, which will also provide a value-added service to the ED. Additionally, the on-site Clinical Skills Simulation Center for

medical education should be used as frequently as possible for on-duty crews, especially to conduct training on high risk/low frequency procedures.

7. Mutual Aid - The UCFD personnel's primary responsibility is to provide for the safety of campus. Outside resources, such as Farmington Fire or other local Fire/EMS providers, must be acclimated to, and accepting that the use of UConn Fire Off Campus must be reserved for unusual or critical situations.
8. Training/Safety - While the mission of the department will be to provide for life safety and emergency response to the communities in both Storrs and UConn Health, the safety of responders is paramount from both a practical and legal perspective. The creation of a new UCFD division at UConn Health and the increase in total staff reporting to the Fire Chief presents the need for a coordinated and unified staff training program for all members of the UConn Fire Department. A position (Training Captain) to handle these functions will be created. The position will have responsibilities at both locations and will be charged with verifying compliance with OSHA regulations and national standards for fire department training and safety, such as NFPA 1001 or NFPA 1500. In some situations, this position may alleviate some overtime created by the use of accrued leave by other Captains. In addition to the staff safety and training program, the Training Captain will also be used to create a training curriculum/program for outside fire departments to familiarize them with the UConn Health facility and operations.
9. Redundancy - It is critical to build redundancy into UConn Health's emergency protocols. This plan provides for redundancy by increasing UConn Health staff training to improve immediate actions and by increasing the training of outside departments in locations and protocols. Integrating outside responders into training will provide familiarity to the facility and will improve the ability of outside responders to serve as a reliable source of back-up.
10. Routine Operations - While the most critical role for the department will be to prepare for and respond to emergencies, time not spent on emergency response should be value-added and downtime should be used efficiently and appropriately. Fire department staff are expected to maintain a high level of training and preparedness for all of their skill sets. Additionally, fire personnel will be expected to intensify fire safety, fire prevention, and community outreach efforts within UConn Health.
11. Overtime - Staffing a 24/7 operation in a fire department, where a minimum number of employees is required to be present (in sufficient physical condition), requires either a substantial number of employees to cover vacancies or an understanding that there will always be some amount of overtime. Consideration is being given to moving employees between locations to reduce overtime, especially for long-term absences. Some additional amount of overtime outside of shift coverage, such as training overtime, is necessary to sustain department operations. Alternatives for training models are being explored to reduce these costs.

4.0 CONCEPTS OF EMERGENCY OPERATIONS

4.1 CALL-TAKING AND IDENTIFICATION OF EMERGENCIES

There are two main locations from which information is received about situations that may require an emergency response from the fire department. The first location is the UConn Health Public Safety Dispatch Center, which monitors the fire alarm system and receives routine calls, campus emergency line (x7777) calls and 911 calls transferred in by other dispatch centers. The second location is the Facilities Environmental Control Center, or “ECC,” which receives calls about environmental conditions and also from Facilities personnel who can provide radio notification to the center when discovering a situation. Both locations should continue to be used, however protocols for each location will need to be reviewed to ensure that call takers are securing enough information to determine whether just the on-site fire department or other resources might be needed.

4.2 DRAFT EMERGENCY RESPONSE PROTOCOLS

The following are basic examples of how the fire department will initially respond to certain incidents when operating at minimum staffing. They are not reflective of all tasks or responsibilities of the fire department, only detail the first few moments of an incident, and are subject to change. They are presented only to articulate some of the impacts and manners in which firefighters can engage in operations under the proposed model.

Structure Fire Response: A report of a structure fire upon dispatch will automatically generate a response from the Town of Farmington Fire Department. When three UCFD personnel are on duty, to ensure compliance with OSHA regulations, the following actions should be taken by the UCFD:

- Formal command should be established outside of the hazard area by the officer in charge.
- Command will assess for reports of rescues that may be needed.
 - If there are known situations where life safety is endangered, such as if rescues are needed or intervention to protect occupants in place are indicated, fire personnel will be authorized and expected to take immediate action.
 - If there are no specific life safety hazards, the remaining two fire personnel will work to put fire suppression measures into place.
- If immediate life safety concerns are addressed and if suppression measures are in place prior to the arrival of back-up personnel, fire suppression operations may be initiated from outside the hazard area and will be directed so as to keep the fire from spreading to unaffected areas.
- Once sufficient fire companies/personnel are on scene, interior fire attack may be commenced.
- In an expanded incident, UCFD firefighters (non-supervisors) may need to be placed into areas of the incident command system where they will be responsible for supervising tasks or assignments utilizing outside responders.

Fire Response: A single detector activation, without additional information, may be handled by the UConn Fire Department personnel. Any call that is reported as a fire, multiple fire alarm activations, sight of smoke, multiple reports of a smell of smoke/burning, electrical emergency, etc., must generate a joint response from the UConn Fire Department and the Farmington Fire Department.

- Many alarms may ultimately be deemed accidental, unintentional, or non-emergencies, but any delay in notifying sufficient fire department resources for a “real” fire could have serious life safety consequences to the public and responders.
- The benefit to an on-site department is that they generally can identify situations quickly and escalate or cancel outside fire departments.

For emergency response situations where a fire investigation or alarm is discovered to be a structure fire, the fire officer in charge may assume a combative (forward) command. The following actions should be taken while waiting for additional resources:

- Direct any area staff (non-FD) to protect-in-place or evacuate occupants as appropriate.
- Locate fire.
 - If in the incipient phase, a water extinguisher or other immediately available suppression means may be used.
 - If beyond the incipient phase, a search for any occupants or immediate life safety hazards should be conducted while withdrawing.
- Confine fire area (close doors).
- Direct or assist with evacuation.
- Establish a fire suppression means and if feasible, initiate fire attack from outside the hazard area.
- Once sufficient fire companies/personnel are on scene, interior fire attack may be commenced and if feasible, the UConn fire officer in charge can withdraw to an exterior command position.

Hazardous Materials: There are numerous variables for hazmat call-taking, as well as the initial and secondary responses. The term “hazmat” far exceeds just a “spill.” A hazmat classification can be spills, odors of chemicals, odors of natural gas or propane, etc. It is the intent of the UCFD to continue to maintain the hazardous materials technician level of training. The approach to hazmat situations will require good dispatch protocols so that additional resources automatically respond when the situation is thought to be serious or escalating. A standard hazmat response will trigger a response from the UCFD. The following actions may be taken:

- UCFD will isolate the area and deny further entry.
- Any injuries, illnesses or exposed persons will be addressed.
- Utilizing appropriate personal protective equipment for the reported hazard, UCFD may perform reconnaissance with a cache of metering equipment.
- If hazardous conditions or “turn-back” conditions are discovered:
 - Immediate rescues before withdrawing are acceptable.
 - If no rescues, the priority of UCFD staff will be to establish and mark control zones.
- Once the need for rescue has been eliminated and control zones are set up, UCFD may conduct additional research on the products involved and will wait for the arrival of sufficient responders before engaging in additional mitigation.

EMS Response: EMS response will be focused on emergency calls originating on the UConn Health campus. The procedure for handling EMS calls will be to provide advanced life support response and transport. Emphasis will be placed on returning the assigned UCFD personnel back into service as quickly as possible. However, to ensure that a sufficient medical response is achieved if UCFD units are committed, the local EMS providers will be engaged to provide first response and ALS transport whenever a UCFD unit is initially unavailable. Requests to provide EMS assistance Off Campus will require the direct approval of a UConn Fire supervisor.

5.0 FISCAL ANALYSIS SUMMARY

In addition to reduction in staffing and overtime costs, one element of cost reduction in this plan is a benefit of centralization relating specifically to a memorandum of understanding (MOU) between the UConn Office of the Fire Marshal and Building Inspector (OFMBI) and UConn Health. The MOU currently outlines an agreement for UConn Health to reimburse OFMBI for the cost of fire marshal and building official services. The current cost to UConn Health of approximately \$284k will be reduced to the equivalent of the full cost (salary and fringe) of the Training Captain (~\$182k). The former MOU funding will be changed to a permanently funded personnel position to include the appropriate contractual increases to sustain the employee (in perpetuity). OFMBI is committed to providing the same level of service to UConn Health but a reduction in this MOU will save UConn Health \$100k.

Basic cost savings are as follows:

Restructure Fire Chief Position ³ @ UCH (incl fringe):	- 203,830
Eliminate Some Existing Vacant FD positions ⁴ (incl fringe):	- 408,496
Reduce UCH and OFMBI MOU:	- 100,000
<u>Estimated Overtime Savings from Reducing Minimum Staffing⁵:</u>	<u>- 312,000</u>
Total Budget Reduction:	\$1,024,326

% of Budget Reduction: Approximately 25%

³ Position Control #N00012

⁴ Position Control #0674429,067809,076774

⁵ Estimated