

## **BVFC Itemized Request**

### **Item 1: SCBA fit test machine: (1 Unit) : \$9,380.40**

Self-Contained Breathing Apparatus (SCBA) fit testing is an annual OSHA mandated requirement for all Fire and EMS members. Previously, it was only needed for interior firefighters, but with the new COVID 19 response protocols, all members require testing. P-100 masks used in suspected COVID 19 responses work with our SCBA masks and now require annual testing for all responders. Currently, we budget \$1200 per year for our interior firefighters to be tested by an outside agency. However, with the requirements to test ALL members, the testing will increase beyond our budgeted amount as we will be testing more than 80 people each year instead of 30; more than doubling our expense. This machine would pay for itself in less than 3 years and allow us to test new members immediately. In addition, we also would be able to test members of Candlewood Co., the Fire Marshal's office, Police Department and WPCA at no cost. The current process of using an outside testing agency is neither cost effective nor convenient for our emergency responders in town. After our OSHA visit, we must test our new members immediately; waiting until Company's annual testing window is no longer acceptable.

### **Item 2: EMS PPE: (28 complete sets) : \$88,060.00**

This equipment is required by OSHA and now provides an extra layer of protection for EMS responders from COVID 19 and other bio-hazards. Paramedics and EMTs often have to operate in hazardous environments and need to be protected. This equipment is not full structural fire gear but provides flash protection and greatly reduces the chance of cuts/punctures. A full set of gear per member includes pants, boots, coat and helmet with eye protection. In addition to protecting our members from biohazards such as COVID 19, it will also allow them to not expose their station uniforms and person to biohazardous materials. It will be worn at motor vehicle accidents, fire stand-by scenes, technical rescue calls and hazardous materials responses. At our OSHA consult, we agreed to provide this equipment to our EMS personnel.

### **Item 3: 5/11 All Weather Jackets: (80 units): \$27,040.00**

This equipment is dual function as it provides both protection from pathogens and allows members to be easily identified. The coat is "all weather" which allows it to be worn year-round. It has several layers and a hood to be used in bad weather. It is water proof and non-porous which blocks COVID and other pathogens from being absorbed in the body. It is easily decontaminated and machine washable. These jackets help easily identify emergency workers which is crucial in multi-family housing units during an emergency. This will prevent our volunteers from damaging their personal clothing while operating on calls where turnout gear is not appropriate to wear. Since COVID-19 started, many of our members have ruined their own clothing due to the decontamination process. This purchase will limit the destruction of members' clothing.

**Item 4: iPads (11 units - 7 data and 4 Wi-Fi): \$5,450.00**

These units will allow us to complete EMS Charts and Fire reports on scene of incidents. We are mandated to complete reports on every Fire and EMS response. All of these reports are now paperless and include specific questions about “COVID involvement”. The iPads will also be used to track equipment, training hours, monitor inventory of supplies, track medical physicals and various equipment and personnel testing. We require a combination of mobile data and Wi-Fi-only units to assist in our operation. Tracking this information is mandated by OSHA, OEMS, and the U.S. Fire Administration.

**Item 5: Power Load lifting units for Ambulances (3 units): \$67,173.36**

These are replacement items and have reached the end of their service life. The units are over 15 years old. The increased call volume (30% in the past two years) as well as the COVID 19 decontamination process has taken a toll on the equipment. The units were not designed to take the constant exposure to harsh chemicals required to properly clean them after each use in the COVID era. The new units are better protected from the decontamination process and, going forward, will be replaced when the ambulance is replaced (every 9 years). In an effort to be financially responsible, we had been placing the old units in new ambulances but the COVID pandemic has forced us to change that practice. These units are used thousands of times a year and are vital for our operation. The units also help with to reduce back injuries as the Power Load does “the heavy lifting” once done by EMTs.

**Item 6: Power Load Stretcher (1 unit): \$20,525.88**

Since our initial request, we were able to use capital funds to replace two of the units and thus, why we have reduced our request to one unit. The stretchers were over 15 years old and had far exceeded their service life. Again, the increased call volume and COVID 19 decontamination processes and chemicals wore out these items. They are used thousands of times a year and are the backbone of our EMS system. This stretcher needs to be replaced and, like the loading system, had been used in numerous ambulances. They now are on schedule to be replaced as the ambulance is.

**Item 7: Stair Chair (3 units): \$10,084.80**

These units are over 12 years old and are used to move patients down stairs and/or out of homes. With the COVID pandemic, these devices were utilized more as many of the patients could not walk due to respiratory problems. Like the stretchers, the increased wear and tear as well as the decontamination process and chemicals from COVID 19 have brought these units to the end of their service life. Like the stretchers, these units have been in service on more than one ambulance and will not be in the future. The stair chairs are used daily – often numerous times during the day – and need to be replaced.

**Item 8: Lucas CPR Device (2 units): \$31,625.00**

The Lucas CPR Device perform CPR mechanically and therefore, perform proper CPR to a patient in cardiac arrest. The units that we possess, have been an invaluable tool during the pandemic. We experienced an increase in cardiac arrests during COVID and currently, we do not have enough units to have one on each of our ambulances. The units we do have, like everything else, are getting worn out due to the decontamination process. Obtaining these units will enable all of our ambulances to be properly equipped. New COVID 19 policies have first responders performing CPR on scene for 20 minutes before terminating CPR and presuming death. This was done in an effort to reduce the number of patients transported to overwhelmed emergency departments. These devices are vital to assure proper CPR is being preformed at all times.

**Item 9: LifePak 15 Heart Monitor (1 unit) : \$34,145.00**

This unit replaces a thirteen-year-old monitor that is no longer supported by software or hardware; it is worn out and is no longer serviceable. Like all of our equipment, the decontamination process from COVID 19 has taken its toll on it. Our cardiac monitors are a great diagnostic tool which are used on almost every response. This is a vital piece of required equipment that needs to be replaced as soon as possible. It is mandated to be carried on every ambulance and ALS medic unit by the State of Connecticut Office of Emergency Medical Services.

**Item 10: Replacement AED units (24 units): \$43,650.00**

These would replace ALL of our portable defibrillation units currently in the field. We have AEDs on fire engines and assigned to our volunteer EMTs to carry in their personal vehicles. They are a vital tool in the fight against cardiac arrest and have been successfully used countless times to save the lives of our residents and visitors including in 2007 when an AED was used on one of our own firefighters who went into cardiac arrest at a fire scene. Many of our current units have outlived their service life and we are starting to have issues obtaining replacement batteries and parts as they are no longer being supported as some of these units are over 20 years old. We have repeatedly placed them into our capital budget however, the units have been repeatedly cut from our budget requests by the town.

**Item 11: EMS Training Equipment: \$3,728.00**

As a result of the COVID 19 pandemic, we have been forced to host mandated in-house training for our EMS providers. In the past, large continuing education classes were held at Danbury Hospital. Those were stopped and online and in-house training are now the new norm for Continuing Medical Education (CME) credits. This equipment includes both an adult and pediatric airway trainer and a cricoid stick trainer. This equipment is crucial to the CME program of our EMS professionals.

**Item 12: Mobile Accountability Board (2 units): \$8,200.00**

These two units will be utilized to track all members operating at Fire and EMS incidents no matter the size of the incident. Accountability was an item identified during our OSHA visit as an area which needed attention. This system allows us to track resources with radios and iPads and allow for limited face-to-face contact allowing us to maintain social distancing in this post-COVID world. It will also allow us track members who need to be rehabilitated and/or requires decontamination. This board is in use statewide and will allow for interoperability at large scale incidents.

## **Hazardous pay stipends**

### **Item 13: Hazardous Pay Stipend for our EMS Staff (24): \$96,000.00**

Since early 2020, our EMS staff has stepped up for our community. They unselfishly continued to put themselves in harms way, often isolating themselves to assure they stayed healthy. They worked round the clock as we were forced to add additional shifts. They spent countless hours helping to organize PPE for the town, clean and decontaminate equipment and living quarters, and were forced to see first-hand the devastating effects of COVID 19. These people are warriors, often working in excess of 48 hours in a row. It was not uncommon to work multiple cardiac arrests during a shift. These brave men and women never held back in treating even the most contagious of patients. They truly gave and continue to give their all and are deserving of this stipend for faithfully serving our community during this crisis. From January 1, 2020 to November 1, 2021 (22 Months) these medical professionals have responded to just over 3,300 EMS responses in Brookfield. The fire and EMS agencies are the ONLY agency in town who could not modify responses, work from home, handle calls over the phone, or just close down. Fire and EMS continued to operate as we normally would and our responses increased while we were forced to work in less than favorable conditions. We are asking \$4,000.00 per EMS Staff member who selfishly responded to calls for help during the pandemic.

### **Item 14: Hazardous pay stipend for BVFC Fire & EMS volunteers(52): \$130,000.00**

From January 1, 2020 to November 1, 2021, BVFC Fire and EMS responded to over 4,800 incidents. (3,300 EMS and 1,500 Fire). During this pandemic, service to our community took on a new meaning. Our Fire and EMS volunteers stepped up and took on roles they never imagined they would have to fill. They were responsible for locating and transporting masks and other PPE for the town responders. They looked high and low for cleaning materials, built storage for COVID supplies, decontaminated equipment and continued to train. Members became part of EOC (Emergency Operation Committee) groups, worked with state and local health boards, emergency management groups, and military officials. Responding to calls during this time was extremely stressful. Many times, members were forced to shower in the station after a call or strip in their garage before entering their homes to assure that they did not bring anything home to their families. Online training and zoom meetings became the new normal. The members adopted an "all hands-on deck" attitude. Adapt, improvise, and overcome became the motto of the membership. A 40-year member of the BVFC stated that no fire ever scared him as much as COVID 19 has. Despite that fear, the members of the BVFC continued to respond to calls for service. The dedicated volunteer firefighters and EMTs of the BVFC deserve to be compensated for their sacrifices and dedication during this unprecedented time. The \$2,500.00 per active member stipend will help offset the costs that our members have endured since the pandemic began due to being a first responder in our town.

## **BVFC Budget Request**

<b><u>Item</u></b>	<b><u>Amount</u></b>
1. SCBA Fit Test Machine	\$ 9,380.40
2. EMS PPE (28 sets)	\$ 88,060.00
3. All-Weather 5/11 Jackets (80)	\$ 27,040.00
4. iPads (11)	\$ 5,450.00
5. Power Load Lifting Units for Ambulances (3)	\$ 67,173.36
6. Power Load Stretcher	\$ 20,525.88
7. Stair Chair (3)	\$ 10,084.80
8. Lucas CPR Device (2)	\$ 31,625.00
9. LifePak 15 Heart Monitor	\$ 34,145.00
10. Replacement AED Units (24)	\$ 43,650.00
11. EMS Training Equipment	\$ 3,728.00
12. Mobile Accountability Board (2)	\$ 8,200.00
13. Hazardous Pay Stipend EMS (24)	\$ 96,000.00
14. Hazardous Pay Stipend Volunteer Fire and EMS (52)	\$130,000.00
<b>TOTAL REQUEST</b>	<b>\$575,062.44</b>