Analysis by: Ryan Kinsella

Portland Fire & Rescue

Portland Fire & Rescue (PF&R) has proposed the elimination of the dive team and the conversion of the rapid-response vehicle program (RRV) from a 24-7 service to a peak hour model to meet the budget guidance that public safety bureaus submit 2% reduction options. PF&R is also requesting one-time resources to implement a cancer reduction program, to replace the roofs at Stations 4 and 22, and to improve the bureau's code inspection system.



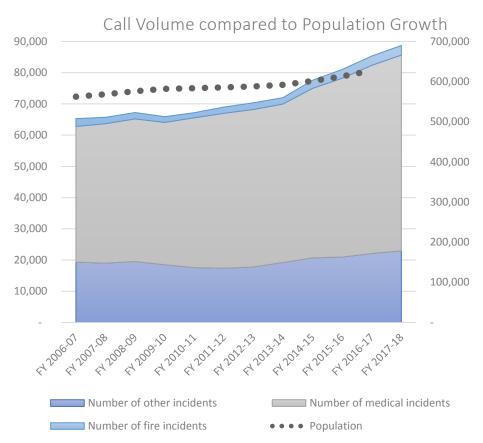
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Key Issues

Managing Future Call Volume

PF&R's ongoing requests are representative of the overall strategic direction: refocusing the bureau's role from emergency medical response and stabilization to an increased focus on proactive medical response. The purpose of this strategic direction is two-fold: first, the current continuum of healthcare is inefficient in that there continues to be an overreliance on emergency room treatment for illness and injuries that otherwise could be addressed through less costly measures. While the federal government considers fundamental revisions to the Affordable Care Act, there remain significant opportunities to more effectively address care of Portlanders using local resources. Under the new direction of Chief Meyers, PF&R is aiming to increase its focus on community health and become a central connector in patient care.

The second purpose of this strategic direction is intended to reduce emergency medical response call volume over the long-term as a result of fewer residents relying on paramedics and ambulatory transport for chronic and less acute medical issues. Fewer calls will require fewer new firefighters and fire stations, potentially resulting in savings by avoiding future costs. However, this strategy does not result in new revenues or savings within current appropriations.



The chart above illustrates several key drivers of this discussion:

- Call volume increases as population increases. While not a direct correlation, it is expected that PF&R will need to address a greater number of calls as Portland's population increases. On average, population has increased by 1% per year over the past ten years (11% total increase). During that same period, total call volume has increased by 3% per year (31% total increase).
- Medical calls remain the largest portion of call volume, representing 70% of total calls over the past ten years.

Based on prior trends, PF&R will need to address an increase of 3% or approximately 2,500 calls per year through various mitigation strategies that shift calls away from 4-person engines' response in order to maintain current service levels.

PF&R has piloted and implemented strategies with the common intent of mitigating the medical call volume. These initiatives have included the following:

<u>Rapid Response Vehicle Program</u>. Implementation of the Rapid Response Vehicle Program, which provides medical response to low acuity calls using two person teams staffed by a paramedic and EMT, thereby lessening the need to use four-person teamed fire engine and truck response.

<u>Alternative Destination and Alternative Transport (ADAT).</u> In FY 2014-15, the bureau piloted the ADAT program, the goal of which is to respond to low acuity calls with a Fire paramedic who would determine if patients would be best served by being transported to an emergency room or to a lower cost alternative healthcare provider or urgent care facility.

Other fire service agencies have been exploring different ways to respond to the increase in medical calls, such as 911 call-center nurse triage and in-field treatment (paramedicine). PF&R is also requesting funding for related initiatives: a program to reduce high-utilizer calls and a Community Health Coordinator, both of which may reduce medical calls (FR_06 and FR_07).

Several questions need to be addressed before making investments in strategies to mitigate future call volume and expand the bureau's role in medical treatment:

- What are the most effective strategies for managing call volume over the next 20-30 years as Portland's population increases?
- What is Portland Fire & Rescue's role in providing medical response, especially low acuity injuries and illness, including chronic illness education for vulnerable populations and mobile clinic services to homeless camps?
- What is the quantity of resource that the City is willing to commit to adapting the fire services into a health provider role, given the need for General Fund resources?

Answers to these questions will define the long-term planning and where Portland Fire & Rescue should focus its resources in regards to medical response.

In addition to defining PF&R's role in medical response, the bureau will face other, more immediate challenges over the next five years: ongoing major maintenance needs and the Logistics and Training Facility relocation.

Asset management and major maintenance needs.

Currently PF&R operates out of a network of 30 stations which are in use 24 hours a day, seven days per week. Since 1998, many stations have received seismic updating and additional enhancements, using resources from the 1998 and 2010 General Obligation (GO) Bonds. As a result of these investments, the overall condition of the stations at present is better than most other assets owned by the City. However, the bureau does not have a major maintenance reserve to fund future costs. PF&R does track and set aside approximately \$300,000 for annual station repairs and maintenance, but the funding source is bureau discretionary resources, which may be limited in some years. Items such as additional dormitories, roof work, and HVAC or generator projects have been more urgent in recent years, therefore reducing the bureau's ability to fund routine station maintenance. Previously, PF&R Management Services Division

estimated an annual need of \$1 million for major expenses, based on current assets' condition and approximate scheduled life-cycle replacement.

CBO continues to recommend that the bureau build a reserve that is dedicated solely to major maintenance needs and asset preservation. Moreover, it is recommended that the bureau develop a scheduled major maintenance plan to submit as part of PF&R's Requested Budget that consists of project detail, timeline, and level of priority.

Logistics and Training Center

Per a budget note within the FY 2016-17 Adopted Budget, PF&R in conjunction with Facilities' Services has hired a consultant to conduct a needs analysis of the Logistics, Prevention and Training divisions, with the goals of identifying the most appropriate and cost effective locations for these divisions. Options may include the Sears Building in SW Portland, relocating to the current Parkrose site of the Training division, in addition to other options. Once the assessment has been complete, the next steps will be for the bureau to develop design, cost estimates and a financing plan prior to seeking Council's approval.

Decision Package Analysis & Recommendations

<u>Disband Dive Team, FR 01, \$(94,900), 0.00 FTE and FR 09, Restore Dive Team to Full</u> Complement, \$56,300, 0.00 FTE

The bureau submitted two packages that would impact the Dive Team: first, a reduction of \$94,900 of General Fund discretionary resources, which would eliminate the premium pay budget, and as a result, the Dive Team (FR_01). A second package would increase the premium pay budget by \$56,300 in General Fund ongoing, which would add eight members to the Dive Team, allowing the bureau to implement its recommended staffing model (FR_09). The bureau has determined that the current staffing model of 13 members to staff three shifts (four per shift with one for Kelly relief shift) is inadequate for addressing most Dive Team situations. If FR_09 is not approved, the bureau believes that the team should be eliminated.

PF&R's dive team was eliminated in FY 2013-14, but in FY 2015-16, premium pay was restored to fund half the staffing level. In the four years prior to the Dive Team being eliminated, the team was dispatched to 55 incidents and entered the water on 15 of those incidents. (The Dive Team does not enter the water if being used on standby for marine incidents, if conditions are changing or unsafe, or if the situation was addressed prior to someone entering the water.) Of those 15 incidents in which the Dive Team entered the water, all were body recovery efforts rather than rescue efforts. Response time during this period was 26 minutes and 40 seconds at the 90th percentile; however, after 60 minutes of a person being under water, the incident becomes a recovery effort rather than a rescue operation. In the past 15 years, there have been zero successful rescues by the Dive Team.

Despite these figures which suggest the limited effectiveness of the Dive Team's rescue efforts, there are two reasons why Council may choose to retain the team: first, the City of Portland's

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Dive Team allows for quicker recovery of bodies. The City of Portland is able to recover the deceased within an hour on average; the Multnomah County Sherriff's Office dive team typically requires several hours and occasionally much longer because they are not staffed for immediate response. Second, the team trains for several very low probability scenarios in which rescues are possible by a dive team, such as persons being trapped in submerged vehicles.

Based on the limited opportunities for successful recoveries, CBO recommends the reduction of \$94,900 (FR_01) and eliminating the Dive Team and does not recommend the requested funding in FR_09.

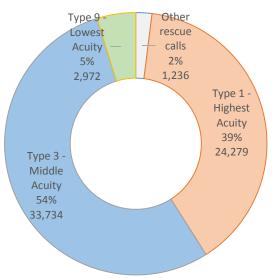
CBO Recommendation: (\$94,900), 0.00 FTE

Convert 24/7 RRVs to 40-hour RRV, FR 02 through FR 05 (\$571,530) and (4.50) FTE per package

These packages decrease ongoing General Fund discretionary by \$499,225 and 4.50 FTE per package within the bureau's Rapid Response Vehicle (RRV) program. In effect, this package would decrease the availability of RRV units to 10 peak hours per day. During the non-peak hours, a four-person engine or truck response would be dispatched for all 911 calls, regardless of severity, resulting in delayed response times.

The RRV program as implemented is designed to alleviate some of the station workload by dispatching a two-person unit to the lower acuity and public-assist calls, allowing for four-person units to be in service for dispatch to either higher acuity medical, fire, or rescue calls. Starting in FY 2013-14, the bureau has operated four RRV units, stationed in north, east and southeast Portland, locations which coincide with higher call volumes. However, under the current structure and protocols, RRVs can respond to the lower acuity and public assist calls anywhere within the city if it is determined that the unit is available and can respond within 20 minutes. In the event that an RRV is not available within this timeframe, the call is assigned to

RRVs address a small portion of total EMS call volume



the responsible Fire Management Area (FMA) for dispatch and response by a four-person engine.

As evidenced in this chart, these lower acuity (Type 9) calls for medical service accounted for 4.8%number of the total EMS call volume in FY 2015-16. The majority of the initial dispatch codes in the EMS system are categorized as Type 3, which is not the most urgent type of call, but still dispatches a four-person engine or truck in addition to a two-person private ambulance in most cases. However, RRVs also respond to a select set of Type 3 calls within its FMA for certain types of incidents, increasing the number of calls appropriate for RRV units.

The risk of cutting all four RRV units would be the potential delay of 90 seconds per call for approximately

500 Type 1 (high acuity) calls per year as modeled by PF&R. This results from an engine having to travel outside of its primary fire management area while the engine in the primary fire management area responds to the low acuity call previously addressed by an RRV. The risk of an additional 90 seconds for the highest priority incidents is critical, but for other incidents, this delay would typically not impact the outcome of the patient

This analysis is based on the assumption that all four RRV units are converted to peak staffing. However, due to the proximity of the three RRVs in east Portland, there is the possibility of consolidating non peak hour workload into one or two RRVs in east Portland. Before implementing the model, PF&R would evaluate deployment to determine which changes would result in the fewest delays, taking into account call severity, response time, and response reliability.

CBO notes that the conversion of one or two of the RRV units may not significantly delay response to a large number of Type 1 and Type 3 calls; however, CBO also recognizes that the RRV program is another strategy that intends to address the large volume of emergency health calls. The recent Government Accountability, Transparency and Results <u>sessions</u> corroborated these findings and recommended that the RRV program expand the type of calls to include Trauma 3 and Service calls and increase the number of RRV units available during peak hours in addition to several options for improving the program. CBO also notes that this program has been effective in meeting the initial goals of ensuring that the City is sending appropriate resources for 911 dispatched calls and preserving response reliability for engines and trucks to be in service for more critical calls. As such, CBO does not recommend these reductions.

Converting the program to a peak hour model or eliminating the RRV program may be appropriate in future years if response to the majority of Type 9 and Type 3 calls can be provided by ambulance services, following a revised contract or if community health programs (such as the programs requested in FR_06 and FR_07) are effective in lessening call volume of RRV units.

CBO Recommendation: \$0, 0.00 FTE

Community Health Assessment Team (CHAT), FR 06, \$146,382, 1.00 FTE

This package increases General Fund discretionary resources by \$124,758 and transfers resources of \$21,624 from the Fire & Disability & Retirement fund, and adds 1.00 FTE to create a position within the Medical Services and Training Division that would provide proactive assistance to approximately 30 residents who regularly call 9-1-1 for emergency services ("high utilizers"). Conditions of the high utilizers typically include chronic medical illness, drug addiction, and mental illness. Currently, Multnomah County has social workers who provide response to high utilizers. Due to resource limitations, they do not have capacity to address demand, shifting the work onto PF&R.

A pilot of the program, funded by the Innovation Fund, has shown to be effective in reducing calls of high utilizers. Of a group of 17 pilot enrollees, calls were reduced by 75 percent, from 274 to 69 in the following 6 months.

There are several reasons to implement the program: first, this program aims to decrease call volume over the long-term, thereby limiting the need for additional fire fighters and stations. The bureau estimates that this position would reduce the number of medical calls by approximately 500 per year. Second, this program would also result in decreased costs of ambulance services and for the insurers of patients. Currently, though, there is not a mechanism for PF&R to receive a portion of these savings. Lastly, providing proactive services delivers a more appropriate response and improved level of care for these residents.

As currently requested, this position would be funded solely by General Fund resources with the potential for grants and reimbursement from community health providers. However, without significantly expanding this model, this program is unlikely to have meaningful impact on call volume. Program expansion would require significant investment in General Fund resources or require a sustainable resource. Due to these concerns and because of the limited availability of General Fund Resources, CBO does not recommend funding.

CBO Recommendation: \$0, 0.00 FTE

Community Healthcare Coordinator, FR 07, \$173,094, 1.00 FTE

This package increases General Fund discretionary resources by \$147,054 and transfers resources of \$26,040 from the Fire & Disability & Retirement fund and 1.0 FTE to create a Community Health section within the bureau. This position would primarily focus on improving overall community health, and the request demonstrates PF&R's strategic intent to expand its role from solely emergency medical response into health education and prevention. This position would be tasked with developing contracts with hospitals for readmissions reduction, broadening community health education, developing mentoring programs, and assisting in the strategic plan of mapping health disparities within fire management areas.

This position could recover some costs. As a pilot project, Council approved an agreement with Legacy Good Samaritan Medical Center (Ord 188202), which would allow for reimbursement up to \$24,000 over a six-month period. Assuming that the position solely focuses on readmission reduction visits, CBO estimates that the position could recover 70-90% of direct costs. As requested, however, readmission reduction visits are estimated to be 30-40% of the position's time, with the remaining portion to be spent coordinating a volunteer network and a mobile health clinic for homeless camps. CBO notes that the current scope of the position may require more time than available for a single position, and as a result of the limited time for readmission visits, the potential for cost recovery would be minimal. As an alternative, the scope of this position could be focused solely on readmission reduction visits, increasing the opportunity for full cost-recovery; however, securing sufficient revenues, without temporarily continuing to fund the pilot with General Fund resources, may be challenging.

CBO has concerns as to whether the position can effectively address all goals of the program as drafted. Without a well-defined work plan that includes performance metrics related to the program tasks, CBO does not recommend ongoing funding. Depending upon Council's willingness to move forward on Fire's strategic vision, then CBO recommends that the bureau return with a more focused proposal in a future budget process.

Similar to the concerns raised in the previous package, CBO also has concerns as to whether the City will have the resources for an increased focus on community health while also reducing call volume.

CBO Recommendation: \$0, 0.00 FTE

Professional Standards Administrator, FR 08 \$194,194, 1.00 FTE

This package would increase ongoing General Fund discretionary by \$165,994 and transfers resources of \$28,200 from the Fire & Disability & Retirement fund, and 1.0 FTE to create a permanent Professional Standards Administrator position that would be tasked with addressing discipline and grievance issues, managing behavioral health improvements across the bureau, and developing and implementing the bureau's equity plan.

The amount of time spent by deputy chiefs, the division chiefs, and the Fire Chief on such issues is unknown but it is expected to be negatively impacting their ability to address other management issues and initiatives. The Bureau of Human Resources has not provided data on the number of grievances filed by PFFA, but it estimated that there were approximately 13-16 grievances per year in previous years. Last year there were 20 cases that resulted in disciplinary action in addition to a larger number of incidents and investigations that did not result in any action.

This position would also develop and coordinate the implementation of the bureau's equity plan. The bureau has delayed the completion of its Racial Equity Plan during the transition of the new Fire Chief. Completing the equity plan requires a significant amount of time, and bureaus of similar size have single positions dedicated to the coordination of the plan's implementation. If the position is funded, CBO recommends that the position description is scoped with feedback from Office of Equity and Human Rights (OEHR) on how to most effectively address the bureau's equity issues.

CBO recognizes the value of minimizing the time bureau managers spend on discipline issues and the need for the bureau to address equity issues, but does not recommend funding in FY 2017-18. Rather, CBO recommends that first the bureau identify opportunities to streamline the grievance and discipline processes through organizational improvements, and second, that the bureau evaluate whether its equity needs can be addressed with existing positions or whether a dedicated position is necessary.

CBO Recommendation: \$0, 0.00 FTE

High-Speed Connections to Stations, FR 10, \$50,000

This package would increase ongoing General Fund discretionary resources by \$50,000 to fund the increased costs of upgrading the internet connections at the bureau's 31 stations. One-time installation costs of \$150,000 will be funded by a grant and remaining Public Safety Systems Revitalization Program funds. Currently, firefighters require internet access to use the Fire Information System to track staffing status; prepare fire and EMS incident reports; file probation, counseling, and discipline reports; complete fire inspection reports; and draw auto accident and building layout diagrams. While the system is slow, the slow internet speed does not prohibit these activities from being completed.

Increased speeds would allow for video conferencing and enhanced training videos and training tracking. To the degree that these trainings and meetings can be completed during current shifts rather than through additional service hours, then online video conferencing and training could decrease personnel costs.

Increased speeds would also add capacity for mobile data computers, allowing fire engines and trucks to receive automatic updates to building layout diagrams and key geographical information. The bureau has not scoped this MDC project and identified costs, and so it is unlikely that increased internet speed would result in implementation of this technology in the near-term. Based on costs of similar systems in other jurisdictions, this project is likely to require \$500,000 or more. The proposed technology can scale up to 10 Gigabits per second and is expected to provide sufficient internet connection speeds for the next five years.

Due to the efficiencies of video conferencing and online trainings, relative to the low ongoing costs of high-speed internet, CBO recommends this request.

CBO Recommendation: \$50,000

Cancer Reduction Plan – Phase 1, FY 11, \$700,000

This package would provide funding of \$700,000 to fund 300 new turnouts (firefighting uniforms, helmets and boots), allowing each frontline firefighter to have a second set. This request is expected to be followed by an additional request to fund the bureau's Cancer Reduction Plan. Currently the bureau budgets \$160,000 for turnout replacement, which allows for the annual replacement of 70 turnouts and a replacement cycle of 5-6 years. A second set of turnouts will provide firefighters with a clean alternative between cleanings after being exposed to carcinogens following a fire response.

The need for the turnouts is based on the findings of a study by the National Institute for Occupational Safety and Health (NIOSH), which found a correlation between firefighting and cancer. Compared to the general population, the study found that fire fighters had a small to moderate increased risk for several types of cancers, including malignant mesothelioma due to exposure to asbestos, in addition to increased rates of bladder and prostate cancer for those under 65. The increased cancer rates were directly correlated with time spent exposed to fires

and the number of fire runs. Cancer rates are now comparable to cardiovascular and coronary heart disease as the leading causes of death amongst fire fighters. As a result of these findings, Oregon legislation was recently passed that designated certain types of cancer as being a result of duty-related exposure (ORS 656.802).

Studies suggest that it is most effective to invest in the use of respiratory protection and source capture ventilation of diesel exhaust, in addition to adopting practices and using equipment that minimize skin exposure to carcinogens, including a second set of turnouts. The bureau previously invested in higher-quality respiratory protection and currently is assessing systems to improve exhaust ventilation. A second set of turnouts has been identified as the next most effective mitigation strategy in reducing carcinogenic exposure and is a practice adopted by Clackamas Fire District I, TVF&R, and Gresham.

Portland firefighters clearly assume a higher risk of cancer as part of their role and responsibilities, and the bureau has undertaken several efforts to address that risk. CBO recommends \$391,494 – an amount less than requested due to the limited availability of one-time General Fund resources – and that the bureau fund the remaining portion of the request through its annual turnout budget and any year-end underspending.

CBO Recommendation: \$391,494

Roof Replacement – Station 4 and 22, FR 12, \$205,000

This package would increase one-time General Fund resources by \$205,000 to fund the replacement of roofs at Stations 4 and 22. As part of the FY 2016-17 budget, the bureau received funding to replace roofs at 4, 10, 16 and 20. Due to increased construction costs, the bureau was not able to fund the replacement at Station 4.

This project ranked 15th of 33 in the Citywide capital set-aside rankings. Due to the limited amount of one-time resources and the higher priority of other major maintenance projects, CBO does not recommend funding. However, as noted earlier, the bureau's major maintenance fund needs remain a critical issue. CBO continues to recommend that the bureau work to build a dedicated reserve, similar to Parks' major maintenance fund, that is dedicated solely to major maintenance needs and asset preservation.

As an alternative to one-time General Fund resources, the bureau could choose to fund this project with unspent bond proceeds or prioritizing the roofs within its materials and services budget. Within the 1998 GO Bond fund, there is a balance of \$600,000, which the bureau intends to use on preliminary study, design, and permit costs for the Logistics and Training facility projects.

CBO Recommendation: \$0

Code Enforcement Software App Enhancement, FR 13, \$350,000

This package would increase one-time General Fund resources by \$350,000 to fund software enhancements or replacement and \$50,000 for mobile devices for the bureau's Fires2000, code enforcement application. As described by the bureau, there are many current limitations of the system which result in inefficiencies. The bureau is in the initial planning stages of developing replacement options for this software and intends to have completed the assessment and detailed request within the next few months.

CBO supports the plan to replace the system, recognizing the current limitations and possible efficiencies in system upgrades; however, without concrete estimates and a long-term plan for system needs, CBO does not recommend allocating resources to this project at this time.

CBO Recommendation: \$0, 0.00 FTE

Apparatus and Equipment Mechanic, FR_14, \$15,000, 1.00 FTE

This package would reallocate portions of the professional services budget for equipment maintenance to fund 1.0 FTE Apparatus and Equipment Mechanic position. Due to the recent acquisition of two new fireboats and 350 pieces of Self-Contained Breathing Apparatus (SCBA) face masks, the maintenance workload has increased. The bureau has determined the appropriate type and volume of workload such that it would be less costly to complete the repairs in-house rather than contracting out these services. CBO recommends the requested realignment.

CBO Recommendation: \$15,000, 1.00 FTE

Bureau Budget Summary – Request and Recommendations

Below is a summary of Portland Fire & Rescues' operating budget.

	Adopted FY 2016-17	Request Base (A)	Bureau Decision Packages (B)	CBO Recommended Adjustments (C)	Total Recommended Revised (A+B+C)	
Resources		, ,	0 ()	, ,	` ,	
Budgeted Beginning Fund Balance	\$ 2,396,846	\$ 1,900,000	\$ -	\$ -	\$ 1,900,000	
Licenses & Permits	2,550,000	2,830,000	-	-	2,830,000	
Charges for Services	1,595,000	1,450,000	-	-	1,450,000	
Intergovernmental Revenues	615,000	635,000	-	-	635,000	
Interagency Revenue	5,179,450	6,719,776	(211,980) 211,980	6,719,776	
Miscellaneous Sources	132,000	190,000	15,000	-	205,000	
General Fund Discretionary	103,103,985	104,513,833	(292,694) 639,288	104,860,427	
General Fund Overhead	77,098	76,137	-	-	76,137	
Total Resources	\$115,649,379	\$118,314,746	(\$489,674)	\$118,676,340	
Requirements						
Personnel Services	\$ 97,023,341	\$ 99,421,961	\$ (1,655,714) \$ 1,654,774	\$ 99,421,021	
External Materials and Services	7,307,569	7,335,474	911,040	(598,506)	7,648,008	
Internal Materials and Services	6,461,914	7,132,107	50,000	-	7,182,107	
Capital Outlay	4,856,555	4,425,204	205,000	(205,000)	4,425,204	
Total Requirements	\$115,649,379	\$118,314,746	(\$489,674	\$851,268	\$118,676,340	

City of Portland

Decision Package Recommendations

(Includes Contingency and Ending Balance)

		Bureau Requested				CBO Analyst Recommendations					
	Bureau Priority	FTE	Gen Fund Ongoing	Gen Fund 1-Time	Other Revenues	Total Expenses	FTE	Gen Fund Ongoing	Gen Fund 1-Time	Other Revenues	Total Expenses
Portland Fire & Rescue											
<u>Adds</u>											
FR_06 - Community Health Assessment Team (CHAT)	01	1.00	124,758	0	21,624	146,382	0.00	0	0	0	0
FR_07 - Community Health Coordinator	02	1.00	147,054	0	26,040	173,094	0.00	0	0	0	0
FR_08 - Professional Standard Administrator	03	1.00	165,994	0	28,200	194,194	0.00	0	0	0	0
FR_09 - Add Members to Dive Rescue Team	04	0.00	56,300	0	0	56,300	0.00	0	0	0	0
FR_10 - High-Speed Connection to Stations	05	0.00	50,000	0	0	50,000	0.00	50,000	0	0	50,000
FR_11 - Cancer Reduction Plan - Phase 1	06	0.00	0	700,000	0	700,000	0.00	0	391,494	0	391,494
FR_12 - Roof Replacements - Stations 4 and 22	07	0.00	0	205,000	0	205,000	0.00	0	0	0	0
FR_13 - Code Enforcement Mobility and Other Enhance	08	0.00	0	350,000	0	350,000	0.00	0	0	0	0
Total Adds		3.00	544,106	1,255,000	75,864	1,874,970	0.00	50,000	391,494	0	441,494
<u>Reductions</u>											
FR_01 - Eliminate Dive Rescue Team	01	0.00	(94,900)	0	0	(94,900)	0.00	(94,900)	0	0	(94,900)
FR_02 - Reduce one 24/7 RRV to one 40-hour per week	02	(4.50)	(499,225)	0	(72,305)	(571,530)	0.00	0	0	0	0
FR_03 - Reduce one 24/7 RRV to one 40-hour per week	03	(4.50)	(499,225)	0	(72,305)	(571,530)	0.00	0	0	0	0
FR_04 - Reduce one 24/7 RRV to one 40-hour per we	04	(4.50)	(499,225)	0	(72,305)	(571,530)	0.00	0	0	0	0
FR_05 - Reduce one 24/7 RRV to one 40-hour per week	05	(4.50)	(499,225)	0	(70,929)	(570,154)	0.00	0	0	0	0
Total Reductions		(18.00)	(2,091,800)	0	(287,844)	(2,379,644)	0.00	(94,900)	0	0	(94,900)
<u>Realignments</u>											
FR_14 - Apparatus & Equipment Mechanic	01	1.00	0	0	15,000	15,000	1.00	0	0	15,000	15,000
Total Realignments		1.00	0	0	15,000	15,000	1.00	0	0	15,000	15,000
Total Portland Fire & Rescue		(14.00)	(1,547,694)	1,255,000	(196,980)	(489,674)	1.00	(44,900)	391,494	15,000	361,594