

Public Safety Committee Meeting Transcript – 07/19/2021

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>> Harper-madison: Good morning, everybody. I am mayor pro tem harper-madison. We are meeting on webex in Austin, Texas. The time is now 2:07 P.M. Our first item is approval of the minutes of the public safety committee meeting from Monday, April 26, 2021. Is there a motion to pass those minutes? Looks like councilmember Kelly makes the motion, seconded by councilmember Casar. All in favor? It appears unanimous. That item passes. Moving forward, item number 2 on our agenda for today, discussion with Austin ems association regarding city emergency medical services operations and response related to the February 2021 work from home event, otherwise known as winter storm uri. We'll go ahead and get started with that presentation. I believe I see Selena here

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and -- feel free to go ahead and get started and we'll ask questions after. >> Awesome. Thank you all so much for having me. Did to see all you council members. And giving me a moment and really my medics a bit of space to share what it was like during the ice storm. I know many of you saw my own personal accounts, but that was just one of so many. And I really think our medic stories really should be heard, a, because we don't want anything like this to happen again, and also just because y'all deserve to know what it is like to be a first responder in this city with what we're facing. I'm getting a little feedback. I want to make sure my volume is okay before I keep going. I want to lay out a timeline

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and give some context. I'm sorry, I'm just making sure that somebody is not telling me I need to be doing something. I keep hearing some other feedback. >> Anybody who is not speaking if you would mind muting your audio. I don't have the feedback on our end, Selena. >> Might be just me. I want to give context of what it was like overall for our medics and share a few weeks -- almost a week after the ice storm we sent out a survey to get just feedback from our medics so I'll share with y'all what that survey was and then some quotes, some themes from that survey and then the recommendations that came from that survey. Can we go to the next slide, please? So this graph compares, you will see the blue lines are our call volume and then the Orange line and the gray line, these are

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temperatures. And that black horizontal line in the middle there is freezing point. So you'll see from February 10th is really when medics started really talking a lot to each other about the iced over overpasses and how best to extricate patients and actually maneuver up the 84 passes. And you will see on February 11th throughout that whole week, so Wednesday through Friday, it started getting really bad, if y'all remember, we had the 26 car pileup. And then between February 11th and 12th we actually started seeing some warnings to the public. I think at all levels, the state, Austin, Travis county, we were all sending warnings to tell people not to drive because of how dangerous it was. And then you will actually see on the 12th and the 13th our call volume goes down a little bit because people are heeding those warnings. On the 14th and the night of

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the 14th that's when all temperatures were below freezing and we started seeing the power outage. And you will see from the 13th to the 15th, our call volume more than tripled. And then you'll see it slowly drops down. If we can go to the next slide. This is a comparison of our call volume from last year. If I tell you we did 600 calls in a day you don't really know what that is a normal day for us. The blue line is our call volume each day of the ice storm and the Orange line is the exact same day last year. February 13th last year the call volume was about the same it was this year and this is also before we canceled south-by, before we really started seeing the pandemic locally. So that's why to me it's still a valid comparison. On the 14th you will see

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that our call volume starts going up dramatically above what we saw last year and then on the 15th you'll see last year our call volume was up 500 and our call volume on February 15th this year was 1500,

so it tripled. And at about 500 calls, that's a pretty heavy call volume for us anyway, so for it to triple is just -- it's basically unthinkable and we've never seen anything like it. We never have calls holding and we saw that quite a bit. Obviously we saw that -- 40% of austinians lost power for days. The calls we were experiencing were related to being stranded, medical complications from losing power. A lot of people were simply at their limit from being cold even if they weren't having a medical emergency. So if we can go to the next slide, I want to share with y'all the questions we asked

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our medics. We asked eight questions. We asked if we have another extreme winter event, which I think we will have, what do you think should happen next time? We asked what was your experience during this ice storm? What did the department do well? What could the department have done better? What did the association do well? What could we have done better? Is there should be you would like to shout-out for kudos. We had a ton people who did really amazing work and really took care of other people in the field and take care of patients and we sent all these kudos out to people to let them know. And what advice would you give to a medic who has never experienced an ice storm in Austin? And the next slide you will see some common themes that we found and we also want to share what strengths we discovered as well. Next slide. So our medics faced extremely poor conditions. It was extremely challenging for our first responders to

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access patients. Many of the roads that I believe Klein was impossible to make it up. When we get into the country and those roads are much less traveled, we had quite a few medics going into the ditches, the embankments between the two roads, because they had no idea where the road actually was. We learned we had such a large medically vulnerable population in Austin that had O2, die although cis, methadone and other power needs that keep them healthy and to be able to be outside of the health care, hospital system. Speaking of hospitals, we saw some hospitals close, some close to us. We either could not get the staff to come in. South Austin they rely on water pressure for their heat in their building and when the water pressure dropped they actually closed to us.

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We started hearing that Dell Seton, the ER was going to potentially close to us, but I think that we were able to avoid that. We had obviously appear increase in accidents. Our ambulance had to be pulled out of a day care Russ situation and we got stuck many times and many of our medics experienced the same thing. We experienced power to critical infrastructure and we lost water to critical infrastructure. We absolutely had medics who were going to the bathroom and using the kitty litter that the firefighters

have to put on top of that. We know that we're supposed to have generators on a lot of our ems fire stations and those failed. And so for us what that meant is we couldn't charge our radios, we couldn't charge our monitor batteries and our monitor batteries are the ones that probably performed the most important thing, which is defibrillate patients. So that was definitely very, very challenging to

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overcome. Next slide. Some strengths that we saw, last year we saw reimagining of public safety and a lot of that did have to do with ems and how do we we think how we do ems? I think a lot of these conversations also came out of the pandemic. So in the reimagining public safety conversation, we saw our c4 line, our paramedic hotline, be fully funded. And they were actually instrumental in our ice storm response. They actually diverted over 800 calls. So it's 800 times that our ambulances didn't have to go out in the icy conditions and keep somebody else waiting. So they did a lot of really excellent work and they helped coordinate care for people and it was really impressive. Our ocmo response. This is the office of chief medical officer that was

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spearheaded by councilmember alter. They were also instrumental in providing adaptability for the types of emergencies that we were seeing. So specifically they were able to use the expanded community health paramedics, this was another outcome of reimagining public safety. These community health paramedics could be given a different scope to use in the field. So what we saw is many of the dialysis centers closed or people couldn't get to their dialysis centers. They couldn't get staff, they lost power, lost water. If you miss dialysis more than three times, two or three times, depending on your level of renal failure it can be absolutely deadly. We did have one person die from missing dialysis. Because we recognized this relatively early, our medical director allowed our community health paramedics to carry kxlate.

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It forces ex-electrolytes to go to the right place. It can be life saving for people who are on dialysis. They were able to buy time until their next dialysis appointment so that was really awesome to see. They also help get up a facility that would just provide power so people we were medically vulnerable and needed power could have a place to go. Our department did have some response alteration. There was excellent teamwork with the first responder organizations, including our APD, AFD, and many of our esds. Our department did provide preparation pay which allowed medics to come in the night before their shift to make sure they could get in there safely. Many of our executives went up and picked up

medics to bring them in if their cars were stuck. Our communications group did amazing work and I have a

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quote from them later on. And we also heard many times that starflight did awesome work. Next slide. So the week was very, very traumatic for our folks. It was traumatic for me, I'm sure it was traumatic for all of y'all as well because y'all were listening to all your constituents during the ice storm. I'm going to share just some things that came up with their concerns as well. So it was very dangerous traveling to work. The department was telling people to keep trying when they were stuck, sliding on ice. That is not acceptable or appropriate or safe. If medics are stuck or can't get to work, don't push them into dangerous situations they are not equipped to deal with that result in long-term damage such as loss of vehicle or bodily harm. We have one medic who got in an accident on the way to work, had a concussion, is still not back at work. So we still see some things like that. I know another medic has been out for the last month because of an injury that they suffered during the ice

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storm. Next slide. It was dangerous traveling on ice, driving on ice. I sincerely considered letting the truck spin off or even tip into a shallow ditch because the risk of a deadly collision was getting too real. We were so close to sliding off roadways and off of guardrails and overpasses, most of which would have ended in our death, we often had very little control over our ambulance. I had a can conversation in my head about what my last words would be over the radio. Next slide. We were held over for hours and then not released. I was never called from my commander to be released. Once I called at noon about an update, I was told oh, yeah, you should have been released awhile ago. Exhausted. Ended up getting off six and a quarter hours late. Next slide. We had no breaks or food. So this is from our communications division. I sat at my com console. I was on the radio three of

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the days, taking one break a day to go to the restroom, feeling guilty the whole time because I knew how much of a strain it put on my co-workers it put on them to be out of the room. In the field, I worked 20 hours on a shift. We were sent from far north to far south back to back, no food, water or relief. Was told couldn't use the hospital restrooms. We had no relief. They were exhausted, no nutrition or basic needs to be met. I'm female. I pediatrician in the back of my truck in a vomit bag because it took four hours to stop the truck, not seeing when I would see a bathroom. I had abdominal cramps and opted to swallow the pills dry because I didn't want to consume water. This is what I was talking about. When

medics felt like our executives were invisible: Chief Rodriguez has retired, but I don't think he was out there visible or sending out

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communications the entire ice storm. I actually begged chief brown to ask chief Rodriguez to send out an email to the crews to bug them out, for them to understand this is an emergency, we support you. We didn't get enough communication. Our medics said, we are only offended a number to the department and city, being expected to run over 30 calls with no breaks and no response from the department. There needs to be more frequent communication from executive to department about changes and expectations. This event should have had several per day, not one per day starting a few days in. In fact, the first time we even heard about a department-wide plan was when I saw social media post sent out to the public about what the department was doing, but nobody in the field received the email message and so it seemed like the department had a plan, but we hadn't heard of it and didn't know half the things that were discussed in that plan. I did immediately call brief brown and he corrected it and sent out to the field basically what the social

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media post said, but it just shows that it felt like the priority was on external as opposed to focusing on the workforce. Next slide. An overwhelming feeling that our medics is that they were alone and helpless. And I think honestly that this feeling continues to this day. I think that in some ways there is a [indiscernible] From the ice. We always feel like if we get in trouble we can always call a commander, we keep going up our chairperson if we need until we get an answer and get part. I think people realize that we never felt, we're really all that we have and the buck stops with us. And that's just a very scary feeling to feel for the first time. A medic said, we were alone in this. Like I said, individuals made this work, the department stood by silently while we struggled. Not only with work, but we too were going through the

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same damn struggles at home. It fte like the department didn't care about their own personnel. Just come to work and run calls. Who cares if you're without power, food, heat, water, gas at home. Then the station's power, water, etcetera started going out as well. Next slide. >> Those were hard to hear. I needed to share them for you to experience what our medics experienced. They deserve to be recognized and I really thank councilmember alter and councilmember Casar for giving declarations for ems. It did mean a lot to our folks and I'm glad to be able to share their stories so you know why I'm so

grateful for those things to show what they went through. We did share in recommendations based on all this feedback to the department, and if you can move to the next slide.

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Some department recommendations that we discussed, improve recommendations to cold defense. In the past we had ice storm boxes that had de-icer for our ambulance. Had chains that would convert our shoes into cleats. Hand warmers, as I remember things like that. We got rid of them a few years ago. The department has agreed to bring them back, which is a really positive step. If you would like to see improved preparedness to lack of food and water. I was told that a lot of the fire stations did have generators, but they didn't work for whatever reason. And so I've heard that these generate easy were being looked at and there were plans for redundancy of power. Our pallet had a pal -- our department had a pallet of MRE's. We fed our medics three hot feels Wednesday through Sunday. We went to five different hospitals three times a day getting hot meals. That's definitely something to think about in the

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future. We had some commanders that went out and purchased meals in the beginning of the week and they were reimbursed, but having a wider plan or somebody to really think about that. More visible staff during multi-day high profile vent. More communication. Quicker staffing alteration. This is all inside baseball so I'll run through the rest. We really want to see some rest during the shifts. Use all ems vehicles. We probably didn't have the staff to use all vehicles, but this was a good recommendation brought forth by our medics that we do have atu's and sprinters and those types of vehicles we could have pulled out. Modified charting. We have a lot of paperwork that we have to do. Modified response. We still saw ourselves like one medic said going -- I myself was dispatched. I was at Parmer and mopac and I got dispatched to slaughter and mopac. So just really thinking

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about if those types of don decisions make sense and how we can improve that. We had some medics who lived at the station for like five days. And thinking about if people are going to have to stay at station because their way home is impassable. How do we treat that more like a deployment and we can also utilize that staff as well. Our ambulances are not four by four or all wheel drive, so considering moving to four by four. Next slide. Since I'm talking to city councilmembers, I wanted to share some of the recommendations for you all. Part of our big budget ask this year and this was also a request from the department is that we move our ambulance staffing to parity. So right now when we add an ambulance, we add 12 dead Mexico per ambulance, but before when we were on a different schedule, many of our medics or staff are eight per ambulance. So we've asked to shore that

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up to 12 per ambulance so that we have it more standard. In a practical since what it does is this allows us to when we have emergencies like an ice storm we're not forcing people to come in who are having devastating things happen at their house who can't really make it in. Also if we can get the staff in it allows us to overstaff so we could have put on all of our reserve ambulances. We could have put on all these additional ambulances. I think that will be really crucial in the coming years when we look at how climate change is affecting weather patterns and just really, really extreme weather. We would love to see a policy that mandates at minimum a 45 minute food break every 12 hours. And I say food break, I'm talking about anything that you need to do that you're not able to do when you're running calls. So we have a lot of station duties keeping the station, cleaning the bathrooms. We're always behind in

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charting. My understanding is that police officers get a mandatory 45-minute lunch break, but our paramedics do not. And so we'd love to see a break every 12 hours and this is for day and nighttime. We would love to see a policy that has executive staff spend time with the frontline staff. 12 hours a month or a quarter, just to see what they are experiencing, and talk to them. I think this would go really a really long way in communication and also in visibility. And a lot of this has to do with 12 Rodriguez was not out in the field during the pandemic. I don't think he came out one time. He had his own reasons for doing that, but I do think moving forward we would love to see a much more visible executive staff. So that's what I have to share with you today. I'm definitely available for feedback and of course y'all all

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know how to reach out to me. >> >> Harper-Madison: Thank you so much for that great presentation. I see many of my colleagues have joined us. Thank you for joining. Are there any questions? Councilmember Kelly? >> Kelly: First I want to say thank you, Selena for coming to our committee and bringing these difficult conditions and discussions to light. I'm concerned for not only EMS, but also our other public servants, fire and APD, I believe they went through similar situations and I believe it needs to be discussed among our public safety partners. I think we need to add that for future topics. >> Councilmember Tovo. >> Tovo: Thank you. I don't serve on the committees, so if council members who do serve on the committee have questions,

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I'll defer mine. But thank you. I want to thank you to-- for all the service and the work as well as your colleagues, but also for being here today to share that information. And I want to delve into it in a little more detail, probably outside of this session, but I am also concerned, I want to make sure this information is making its way into the after action report. So Ms. Xie, can you tell us about how the association, how some of the medics have been consulted in terms of providing information for that after action report as well as for the external audit -- the audit that's being done, not an external audit, but the audit that the auditor is doing? Have you been consulted? Has any of this information made its way into either of those processes? >> I'm not aware. This is probably a better question for chief brown. I have not received any

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request for a citywide audit or a department audit. I know that there was a homeland security questionnaire that one of my medics sound and surreptitiously sent to me and I sent it out to the field to respond to it. But the field was never asked by them to do it. So I have not personally been asked and in talking to my board I don't think -- they haven't experienced any communication from anybody in the city or the department. About an after action report? >> Tovo: That's a real concern and I would like to ask our ems leadership how they are collecting this information. I think this absolutely needs to be part of the after action report. I know when we did our council review of different areas, it didn't uncover all of what you're discussing here today. >> We did really early on share -- so basically the presentation that I gave is a very brief rundown from

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our formal after action report which we had a town hall with chief brown and gave him all those. I don't know if that's what they took from it or if they reached out to individuals outside of that? >> Is it possible to get that full presentation? Is that something that you would feel comfortable sharing with council members? >> And just to clarify, the audit was talking about is the work that the auditor is doing in response to the resolution that council passed. So this may or may not -- she and her team are focusing that audit on certain areas so it may or may not relate to what her area of scope is, but for sure the city's after action report needs to consider things such as what you're describing, the lack of available food, the lack of restroom breaks, the equipment that was not on the track that had been in previous and so many of the other recommendations that you mentioned.

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Chair, when it appropriate it would be good to hear from the ems leadership on how they are hearing and dealing with these concerns with the official after action report that they are briefing. >> This is

chief brown. As Selena said, shortly after they developed their after action report I met with Selena and we did a town hall where we answered additional questions and they were providing all that information to us. We are taking all that information and included it in the department after action report and that folds into the city and the overall action report. So some of the things we're not waiting for the after action report as Selena said. We're already in process of developing those winter boxes, as she mentioned earlier. The act tracks, those are the covers that you put over your shoes to be better to walk on ice, those will be back in the winter box.

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Those will be coming back long before the action plan either for the city or others developed or finalized. We have already recognized that. Some other things that is -- while switching over to a four by four vehicle is a much bigger and arduous process since we only purchased so many ambulances. It may not be practical. We are in the process already of purchasing snow chains. With that will come some additional training for our staff and actually even four by four units. We should also require them to drive slower because on those you can't travel at high speeds on them. Not that any of our folks were driving at high, high speed, but even 30 miles per hour is pretty fast on snow chains or even a four by four. So we've taken a lot of the input that she's already provided to us and we've heard from our staff and we're always working on

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communication with the staff. It's more town halls from the shifts. All of it is to hear directly from them what's going on. We're trying to improve communications. I think that's always a big point for any organization of our size is communication so 24 trying to figure out what goes best for everybody and trying to communicate with the staff and what they're looking for. >> Thank you very much. Very helpful. >> Harper-Madison: Thank you, chief. I think councilmember Casar and then councilmember Kelly. >> Casar: I was wondering about the winter and what we could do immediately after the after action reports. But I am interested in -- both from the union perspective and then also here at EMS has -- so many of the things that you've

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brought up really could that EMS needs to handle in a heat wave or in a wildfire situation where there's widespread power outages and huge increases in calls. The person who needs methadone there they need power in their house to be able to survive outside of a hospital setting and all of the things that medics heroically want to address, of course could happen in a winter event, but in all kinds of events that may even be more common. So what are we taking away from this that prepares us for those

events. Ice and snow is important, but it sounds like a lot of what you're dealing with is just what happens if there are tons of medical calls all at once. I think that's moving us to a part of 12 medics or ambulance does because I know right now is that we're

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having a crisis right now. We're quite a few short. But if council would commit to getting us up to the 12 medics per, when we do have pandemics, when we have ice storms, when we have retirements and separations at the level that we're having, when we fall behind a little bit on staffing we won't be in crisis like this. Furthermore when we are well staffed and we did have 12 medics per ambulance, then we would be able to up staff. So historically when we've had really bad flooding we have been able to put on a few extra rescue units or just a few openings. We would not be able to do that right now. I would love to see us be in a better place so that we could be able to up staff because so many of these things are going to be unforeseen exactly like you're saying. >> Casar: So as far as what we're talking away from this and how that might

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apply in a heat wave situation or something that isn't in a winter storm but simultaneously knocks out power and puts people in that position citywide. >> Councilmember Casar, as the chief said, public works is already going through and doing a lot of generator servicing and making sure that they are up and running at the stations that have them. As soon as we can get them in there we're going to get them into the stations. We're also making sure that we have available water on hand or in the stations for our heat event anyway that would be the number one thing. We also have the MRE's, the meals ready to eat that she spoke about.

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The ice and snow is what impeded our ability to really get out and deliver and also really it crippled everybody from being able to come in and do very much even in the public sector. >> Casar: How do we do as far as knowing where a lot of the medically vulnerable folks are. Obviously some people are very statistickered, but do you have a good sense of where folks are concentrated that you would have to be running calls to? >> You know, andic, councilmember Casar, the point that is so hard is like you're saying, we just don't know what the next emergency is going to be. We can only make sure that we have water, make sure that our stations are -- have redundant power. I do think that focusing on medically vulnerable populations is really important and I know that the state is trying to start a registry. I've also had some limited conversations about having a registry -- we as a community should have a better understanding of our

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high populations of where nursing homes are. I'll tell you another quick anecdote. I'll tell you we had a constituent in councilmember Kelly's district lose power and they wanted all 150 people in the nursing home evacuated to a hospital. And they called the hospital and they were like there's no way. And so our medics and some firefighters actually moved all 150 people into the grand hall where there happened to be a fireplace. And that's how we trouble shot that issue. We should have a good list of where emergency homes are that might be vulnerable and I would love it where people could self-report. And I think Austin energy did have a program like that but it's just very, very outdated so it only had a couple dozen people. It kind of goes into right now if I go into a house we can tag that house that if you know this person has really personalized heart

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equipment. So you should be familiar with it before you go into the house so people can actually provide these types of tags so that we can actually run report or know. And he talked to councilmember harper-madison about an idea of also there's somebody in this house with special needs who is autistic and then that information can be sent to police, fire and ems. So we can have this awareness before any of the public safety agencies go in and have just a better understanding of the types of needs that we might be experiencing. >> Casar: Thank you. Go ahead, chief. >> I'm sorry, I just wanted to say as Ms. Xie said, the state does have a registry, but it is self-reporting. We have to get people to register for that and otherwise we won't know through the state. I know Austin public health is aware of a large number of our population and our community health paramedics are aware of a large population. And if we were to get in an extended situation like this

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I know we could tap into some of our local resources we are aware of -- meals on wheels are very aware of where they are delivering to. That population we can pull resources in and if we need to deliver meals to those areas as a city or anywhere else. So we do have the resources. Some of them does take those individuals to self-report much like self-reporting into the reverse 911 system. It does take some campaigning for that. >> >> I want to save our time, but I know that all our friend, from police, fire and ems did so much work as did the people ticketing the water and power lines, but I want to thank our medics and in particular because of all the life saving work you did then and clearly there's a

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lot we need to change to be prepared for the next disasters. So I appreciate that and I think our appreciation has to extend on that and to learn how to do better. >> Harper-madison: Councilmember alter. >> Alter: Thank you. I want to join my colleagues in thanking Ms. Xie and the paramedics for the incredible work during the winter storm and through particularly the last year and a half with covid. I think council has demonstrated with the investments they've made, particularly last August and I was proud to leave on the paramedic hotline that you mentioned earlier. Paragraph so I just want to underscore that piece of it. Thank you also for raising the need for the registry and that information and having that. That was certainly one of my big takeaways and I believe we've provided some

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direction to that effect already to the city manager and the after action piece. But I think it's important. I wanted to ask -- I'm not sure if this is a question from the association or for chief brown but what were the protocols when going into this event and how do we understand how prepared we were even to begin with yes, this was extreme, but can you help me understand what protocols were in place to begin with, and then I have a couple of questions. >> I would say from the field perspective, we -- it has iced over in the pass. I understand driving on the ice and we last transaction and our lug nuts were on the guardrail and I also thought it was not going to hold our weight. I don't think we really have

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how to handle when it becomes icy like that. We had a medic send out here's what you have to do. The fire trucks are weighted in a way they can go up the overpasses. Cop cars are weighted in a way they can go over the overpasses. They go up there, you have a plan with them, they extricate and bring the patient down to you. We were making our own plans for that. I would love to see something more formalized training. I know that the department shared on social media that we headed additives for diesel so that the diesel wouldn't freeze and that came out to the public first before that came to us, but there are some plans. I think that I've seen anything for extreme weather quite like that. I think we tend to develop emergency plans that should work for all emergencies because you can't predict how an emergency would work. We don't have them for all sorts of weather. It's the same for wildfires.

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I know our rescue folks have obviously the most advanced training and the association actually just purchased some wildfire specialty packs for them to wear when they are facing wildfires. And so we're statisticking there, but I think generally it's hard because you can't really predict how an emergency will

go. I would like to see more training on those different types of things. We'll see them more and more.
>> Alter: So I would love to continue that conversation, particularly on the wildfire. I guess part of what I'm trying to ask is I've seen a pattern on some of our plans and stuff that we do need to account for the possibility of extreme cold. So chief brown can you help me understand if ems even acknowledged extreme cold as one of the hazards that we ought to be planning for. >> Yes, ma'am. Thank you, Ms. Alter. I think we do address it,

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both the extreme heat and extreme cold, by trying to harden our stations with generation and alternate generation if the power grid is down. We don't have all stations yet up on that alternative power sources, but we're work towards that. Also one of the things we worked with in the emergency operations center prior to even -- if we know what stations are on sloped driveways and things like that, so we plan on the sanding trucks and the pretreated icers to come and do those areas because we have a history of knowing where it's going to be challenging. Obviously it was probably worse than anybody thought or predicted and we each had some of the personnel that the trucks weren't able to get in and work as well, the drivers. So it's part of the challenge. And obviously the loss of water was something I think beyond most people's current

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plans. So that created an additional challenge. But as far as call volume, Ms. Xie also said we have this plan ready to go. It's for any situation, whether it's heat, cold, last disaster from a tornado or hurricane, is the ability to tragedy calls and not -- triage calls and not send to all calls our ambulances. We work with the mom operation center and the chief medical officer or medical director. We have a plan in place that we will start to only send the fire department to the lowest priority calls. They can also transport if necessary. Then we send the lowest calls. And we have the priority calls and we pulled them in and utilized them in different ways. So we have plans in place to handle situations and it's not necessarily heat or cold or like I said a tornado event or anything like that.

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>> Thank you. One of the things that I appreciate about the ems lid and the association leadership is really trying to focus on problems and be creative and really focus on the well-being of our president dent and also being cognizant of the responsibility we have to our medics. So I want to underscore the response of the innovations of things like paramedic hotline and ocmo and figuring out with the paramedic practitioners, etcetera, how do we best deliver the service and how do we do that? And

sometimes the easiest is not the answer. And knowing when we have to modify things, it does sound like that we can do more to improve communication proos the medics and -- across the

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medics and the leadership. I know given my experience of how much these ideas are embraced and the illness of working together to do these, I think it would be really exciting and interesting to see some innovations on the communications. We have warning stuff. Just to say that we are going to send emails to medics, in this kind of emergency situation there have got to be other ways to communicate out in both directions that some technology even an app that only gets used in the cases of emergencies that you can communicate. There were so many instances where people had to be creative and problem solve. One person was problem solving this guy over here had the same problem. And this isn't true across the city, but I think ems is in a position to be able to learn and to problem soft and figure out. And maybe that would be also

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something to borrow elsewhere. So I just want to encourage and applaud the willingness to work together and I think it's good that you've already had some conversations and some of the steps are already happening before this was even brought to light for us and the city manager's office and hopefully you can productively work together on the next steps so we can support you more in the budget. >> >> Harper-madison: Thank you very much. I believe that councilmember Kelly was next. >> Kelly: Earlier councilmember tovo asked for copy of the presentation and it reminded me there was no copy in the backup. So I would like to have a copy placed online so that we can access it in the future. Also, chief brown, could you talk to us about the staffing needs that you have currently and how you plan to address those needs for the future? My understanding is it that you currently have vacancies and that you're allotted to hire more medics, but I would like to know how you plan to address this with the hiring process? >> Yes, ma'am, thank you,

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Ms. Kelly. So currently we have 110 vacancies. We just started a class of 33 medics today. So they won't fill any of the vacancies until they graduate on October 9th. Previous to this class we did two classes during I would call them the covid period. We were kind of restricted to 20 personnel per class because of social distancing and the room size we had. So it was a little smaller we had some people waiting on the list to hire. And we had to have them wait. So that put a little slowness in our ability to bring in folks, but this is our large class we're bringing in. We already have a process open and it closes in August and we'll be hiring for our January academy and we're looking to put another 30 something folks into that

academy. So we have a plan in place. We have medics coming in from all over the united States. Out of the 33 medics, 16 of

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them are minority of color so I'm really proud that we are getting some diversity into the department. That's been a challenge for us as you may know. And again, they're coming from all over the united States to come work here, which is a good sign. >> Kelly: Great. Thank you so much for that update. >> Harper-madison: Councilmember Ellis. >> Ellis: Thank you, chair. Thank you, both so much for being here. I'm sitting in on the committee. I'm not actually on it but I've been attending for awhile and I'm so curious to see the report and the recommendations coming out of the winter storm. Can you help me understand a little bit more about what parts of these requests and recommendations could be handled without us needing to do changes into the next fiscal year? What is funding that is currently available in the departmental budget and what would need to be addressed moving forward to try to supplement what is available

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to you currently? >> So we are handling within our current budget all of the, I guess, lower level items, like the winter boxes, getting chains for all the ambulances that will be here prior to the next winter storm. Anything related to station generation needs are already being addressed as part of a plan. The only thing that's currently not in the fy22 budget would be any additional personnel that Ms. Xie spoke to to bring our staffing levels to par. That's the only thing I would see in there. The rest of it, communication, we could always improve on communication and we're going to strive to do that. If there's some technological need that we come across and might need some funding for, I think we could probably take care of it inside the department unless it's something that

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is larger than we could possibly purchase. >> Ellis: And do you have a ballpark estimate of how many additional staffers might be needed to get us up to that 12 per ambulance number? >> So we were looking and talked about in the public safety commission meeting that there would be 40 medics needed to bring us up to that staffing level. >> 40 more. And then if we were to be able to budget for that, would you have the ability to train people up in order for us to meet that goal in a relatively short timeline? Just given the emergencies never stop coming in a city like ours and in a world like ours, quite honestly. >> So to be perfectly honest, I would not be able to hire them on day one of the fy22 budget with our existing holes, but I really see us closing that gap next year and if anything I would budget them later in the year to give us time to fill our current vacancies and

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bring them on at the end of fy22 into the following year. I think that would be the most prudent thing if we were to do that. >> I am quite interested in that. We rely on our ems so much and you also -- you and your department always go above and beyond what we could even find feasible as normal humans. So I really appreciate that and I think over the next few years as we look at the budget we need to be resilient in the ems staffing and that we're setting yourselves up -- ourselves up for success in the years to come. Switching topics a little bit, can you tell me a little bit about any conversations that are currently going on about some of the other emergencies that folks have talked about today, like potential for wildfire or flooding? I'm sure with training you go through all the scenarios, but do you kind of keep up to speed on what it would like like if wildfire or flood happened pretty quickly? How does that communication

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work between your department and other departments? >> So we work pretty hand and glove with the Austin fire department, especially with water rescues. We both have resources and boats available to us. And our folks go through training as far as being boat operators for swift water rescue type things. We send them to Oklahoma -- we sent them to Oklahoma most recently. Sometimes we have to send them to Tennessee. These are areas that have specialized training that we can get the boats in and do the training with other partners. And as far as wildfire, we work with the autopsy fire department and working as far as rehab with them. And our biggest challenge probably is going to be not extrication, but an exit plan for residents in those areas in case of wildfire. >> Ellis: I know that's certainly very high priority

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and of particular interest to many folks in our community. I know about 10 years ago we had an extreme wildfire in oak hill. So I wanted to make sure that we as a community can be proactive to make sure that our folks can be as safe as possible given the extreme events. >> Yes. And one of the things with the wildfires is when that happened in oak hill and out into the lakeway area and what we did is the esd's, emergency services, they run all ems calls. They were so taxed dealing with the fire we put additional units out in their area to make sure they had additional coverage for medical calls and that's something we worked with them any time it's needed. >> Ellis: I appreciate that and we certainly look forward to the Travis country ems and fire station opening soon. We are very excited about that. >> Harper-madison: Councilmember Casar, before -- vice-chair Cass czar, before I recognize you, I want to make sure we

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do a quick time quick. It's 3:01 and we still have a couple of preparations today. So if folks could be mindful of the time, please. >> Casar: I'll wrap up. Just a clarifying question, chief. To get the 40 extra staff you mentioned we would need to look for money in the budget above and beyond what we have to get to that point? >> Yes, sir. They're not currently budgeted in the manager's plan. The station on loop 360 is budgeted, along with converting some overtime dollars that the county gives us into real medics, so that's not really an addition. It's more actually securing the people instead of just operating at overtime costs. >> Casar: Appreciate it. And as far as some of the nonmonetary things that were brought up, such as lunch or food breaks or having executive team members being out in the

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field intermittently, those things that don't cost us money, are we at a place where the staff have considered what to put in place and what not to? >> We're looking at all those recommendations and information on how we can do in a fatigue management plan. >> Casar: When do you expect those recommendations to be coming out? >> That will be part of the department's after action report. I believe that Ms. Xie is not just talking about in a crisis like this, but also in daily operations, so those two things have to be weighed along with our response times. >> Casar: Thank you for checking in on that. And if it ends up costing -- it sounds like it could be nonmonetary, but approximate if it does cost us, please raise that to us because I think we want everybody to be able to take a break at work just -- not just from a labor rights perspective, but also to be sure that we're delivering the best service we can to people

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which makes sure that folks get up, so food and a little bit of rest. So please keep us in the loop. Thanks. >> Harper-madison: Councilmember alter. >> Alter: I think there was a efficiency study that now has a fancy name, but I think of it as the efficiency study. Do you have an idea of where that's at and what type of recommendations are coming it forward. >> The dispatch equity and optimization study, I saw the first draft of it. It's being spearheaded by the chief medical officer's office.

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I'm waiting on details in case we need the recommendations or update them. I don't have a timeline of when it could possibly be finished. We provided an update both written and verbal just as late as today on the vendor group. >> Alter: Thank you. And I wanted to follow up on the question that councilmember tovo was asking. If you have 110 medics who [indiscernible] And you're filling them at 30 each, if we were to give you the additional 40 medics, that would not be able to be filled this fiscal year under -- I mean, I just want to make sure -- I heard, Ms. Xie talk about a commitment to doing that and I just -- there are various communications but I just want to be clear, I don't want -- we've gotten in situations in other departments before where there have been vacancies and there's been expectations about how those will be filled that don't

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match up even if we're committed to filling those. So I want to -- I want to be sure if I heard correctly. I haven't had a talk to either of you yet about the needs, but this is not a question about the needs, but a question of the timing. Because I want to learn more about those. But it doesn't sound like even if we did them this fiscal year it would be higher this fiscal year even if we wanted to make a commitment? >> Absolutely if we need them. It's not a matter of do we need them in my opinion. We do need them. But to be fiscally responsible, we are going to work our best to fill vacancies we have now. And I would see a need to possibly fund it in the last quarter of fiscal year '22 so that we have it in the

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books going on fiscal year '23. >> And the 110 vacancies is before the class starts today actually. We'll be down 60 and down over 30 technically with the class in January. >> Yes. >> It would be helpful to have those numbers to try to understand what you buy when and what the full costs are of what that -- >> We have to have 60 new people on board coming by April and with these two classes, the one starting now and the one starting in January that doesn't account for any attrition, so we will lose some during that time frame. Another class coming in the summer with another 30. So that's why it will fill the vacancies, but I would put them for the last quarter of fiscal year '22. >> Alter: Okay. I think I'm scheduled to

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speak with each of you and I'll ask more detailed questions that I can understand better in those meetings. Thank you. >> Sure, thank you. Harper-madison if I may, if there are no additional questions along those lines, I think it's totally appropriate, given the nature of the conversation and what we're talking about, how things manifest, so much of it sounds like it is operations, but some of it is staffing logistics. So I think it would be appropriate for us to at another time have an additional meeting with

this committee about staffing for ems specifically. And so that said, I'll discuss with the other members of the committee and maybe even just offer for future topics in addition to the recommendation made by councilmember Kelly that we have an additional discussion about ems and staffing. Because I think that's an additionally important conversation. I'd like to thank you both so much for your time this afternoon. Thank you for the presentation, the resounding thank you from my colleagues and I for your service. I think we could probably safely say it applies to all of our colleagues and

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all of our city. We absolutely appreciate your service to our communities. And we are out of time so we're going to go ahead and move on to the next topic and I'll say thank you for your time this afternoon. >> Thank you, council. >> Harper-madison: Colleagues, we're going to move on to make sure to squeeze in some of the other items, especially our next item for discussion and possible action on process and timeline for the evaluation and appointment of Austin municipal court judges. I'm not certain who is offering us our presentation on this item. It's not in my notes. And I don't see anybody on the line but us. Acme Arrellano, are we getting a presentation on this item? >> Yes, you are. And I see Rebecca Kennedy here to give that presentation. >> Harper-madison: Fantastic, thank you. >> Alter: Mayor pro tem, I'm going to sign off. I wanted to be in there for the ems. I'm not on the committee.

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Just wanted to let you know. >> Harper-madison: Thanks for joint plan us. Have a good one. >> Hello, my name is Rebecca Kennedy. I want to make sure you can hear me -- I am to make sure you can hear me okay. Perfect. Thank you for giving us this time this afternoon to walk through this process. If we could go to the first slide, please. Our municipal court judges are appointed for four years and their four year term expires on December 31st. So one of the things we wanted to talk with the committee about today is what our process is going to be to reappoint or appoint new new municipal court judges. So the next slide, please. So the qualifications for our judges, they must live in the city limits for at least two years prior to applying. They have two years' experience practicing law in Texas, be in good standing with the state bar and also a U.S. Citizen.

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So our process, and I've worked with our presiding judge statman to talk through this process. We will receive letters of interest or intent from the current sitting judges to have them provide qualifications and then to get what position they prefer. We'll evaluate any potential vacancies and then working with the -- with judge statman we'll identify members for a judicial review panel. And I will talk about that in the next slide what that panel is. We'll post any vacancies we may have and then that panel will review

the letters of interest, any applications for the vacant positions and then we'll evaluate those individuals to provide a recommendation to the public safety committee. After that occurs the public safety committee recommends the judges to the city council and then those individuals are appointed for another four year term

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or a new four year term depending on who it is. Next slide. So the judicial review panel will work with our presiding judge to -- she will contact people that fit into these categories. So it will include individuals from misdemeanor prosecutor, local attorney, criminal justice law reform advocates, staff attorneys, and then she'll also look at several attorney associations and boards to gather a diverse group of individuals to sit on the panel. And this is a similar process to what we did the last time we appointed judges and so this replicates putting that panel together. Next slide. So this slide and the next slide, we outline the time frame for the process because it does involve council confirmation. We tried to work backwards

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making sure that we have individuals ready to go to council in December. So it starts today with this presentation. Once we hear feedback from this body, we will start working on the next steps, which is gathering letters, assembling the panel, looking to do formal advertisement and then along the way working to come back to this committee to provide you status updates as we push forward. Next slide. So this is just the second part of that where as we look into september/october, that's where we're really doing the screening process and we're doing interviews and then November we bring those names back, and at one point we do -- we do want to talk about is that once this is done, and we bring -- we bring candidates back to the committee, you can accept the

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judicial review panels recommendations or if there's some other item that you want us to take into account, we can do that at that time as well. Next slide. So that judicial review panel we will charge them with designating candidates as not qualified, qualified, or highly qualified. We would move those qualified and highly qualified candidates forward to the interview panel. Public safety committee would receive all applications and comments from the judicial review panel. Next slide. So that judicial review panel will also serve as our interview panel. And they'll use a matrix to rank candidates based on their legal knowledge, fairness, judicial temperament, and then they'll rank those candidates, provide comments, and then provide the recommendation to the public safety committee.

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And next slide. And this is where the public safety committee receives that recommendation and then they can accept it to move forward or they can conduct additional interviews. So last slide. I'm here for any questions or any direction that you wish to provide. >> Harper-madison: Thank you for the presentation. Do my colleagues have any questions? Councilmember Kelly. >> Kelly: Thank you. I was wondering how you decided the makeup of the review panel? >> This was based on how we worked with the presiding judge last time we did this to have an impartial balanced group of individuals to come in from the prosecution side, to the defense side, to have those people together. And so that's where it seemed to

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work very well last time to get their feedback on the best people to move forward. >> Kelly: Thank you for that. I just have one follow-up question and then I'll be finished. Would it be appropriate to ask for someone from the police department to be on the review panel to possibly help with selecting the municipal judges, since they're the ones who are involved in the process to get someone in front of them? >> We can certainly add them if -- if that's something that the committee would like us to do. >> Kelly: I think it's a great idea. I'm not sure what my colleagues think. >> Harper-madison: I'll go ahead and weigh in. I would like us as a body to have a discussion about what the cost benefit is there. Vice-chair, did you have any thought on that? >> Casar: Yeah, I do. And I don't mind us having a good and balanced and inclusive committee. I was trying to reopen the

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presentation to get a sense of who -- because I remember from last time -- but I'm having trouble opening up the backup presentation. So I don't know if we can pull that slide back up? >> I think that it is slide 5. I don't know if they are labeled. Right there. >> Casar: And do we have a current balance between defense and prosecution? >> That was one thing that judge statman said she would ensure. >> Casar: And, again, I have no problem with us having -- with us having a member of the police

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department that interfaces with the community court as part of -- as part of the panel. I would just count that on the prosecution side of the -- of the balance. And so we would just want to make sure that

we continue to have that balance struck that judge statman laid out. >> Harper-madison: Thank you, I appreciate that. Any additional questions, colleagues? Councilmember Kelly. >> Kelly: Thanks. I just want to make sure that this presentation is also updated on our website with the agenda items. >> Harper-madison: All right, if there are no additional questions I personally don't have any for this committee. Thank you for your presentation and I really appreciate it. Thank you for being with us this afternoon. >> Thank you. >> Harper-madison: All right, folks, moving on to the final item. Excuse me. Discussion on Austin code

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department uniforms. I have a few questions that got worked into my agenda. So, yes, that discussion I believe that we have acm Arellano here and I see Elaine. Thank you for joining us this afternoon. Please feel free to go ahead and get started. I can't tell if you're speaking, or if you're having audio issues. We can't hear you. I'll give you a thumbs up when we can hear you.

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>> If you're comfortable with me doing so the final item is to discuss the future items for discussion. Maybe we can offer Ms. Garret an opportunity to fix up her audio and come back. Are you comfortable with that, vice chair and councilmember Kelly? Okay. I thought that I saw two thumbs up. I hope that I did. So the final item is are there any proposed items to discuss at a future meetings? And councilmember Kelly, I know that you mentioned one during our conversation with ems. If you wanted to reiterate what that was for the record and then I have a few also. >> Kelly: Yes, thank you so much. I wanted to talk about how fire and EPD was impacted with the winter storm, and so that we can learn from all spectrums of public safety and just discuss that. >> Harper-madison: Thank you.

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I know that you asked for a couple other things. You asked for a backup item that you wanted to make certain that was -- what was the item -- and then asked for the presentation, correct? Just for the record. >> Kelly: Yes, I actually -- after doing it twice today I would like moving forward that all of the presentations for this committee are posted online for transparency purposes and also access to the community to be able to see them. So that was for items 2, and 3 specifically. I am anticipating that I will need to ask for item 4 as well. >> Harper-madison: During the course of our conversation I received the presentations. I wonder if everybody else did as well? >> Kelly: I can check to see if they are online. And I also would like to talk about the hiring process with ems and staffing for future discussion item. >> Harper-madison: And we are definitely in alignment there. And the items for future discussion that I have are staffing for ems, specifically

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I'd like to ask questions about the way that I understand it that it is one of our public service sectors that has the least longevity for professionals who perform the job. I'd like to talk about what it is that we can do about that. I think that from a recruitment perspective it's kind of a difficult -- a difficult prospect to go into the field that you may not have a long career in. In which case I'd like to talk about that. And I'd like to talk about staffing in general. And I'd also like to talk about, you know, we discussed -- councilmember -- vice-chair Casar, I think that you brought up us having a database of sorts where we can, you know, locate the vulnerable populations of people. I would like to very much talk about how we avoid another situation like a mount Karmel in Carmel in my district, multifamily complexes that have sort of compromised infrastructure, especially those -- I don't know

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if this is a combo between this committee and our housing and planning committee, but a real good running list of our aging multifamily housing stock. And then sort of flag anything that might make it particularly tricky if something were to go awry. So with mount Carmel in my district, for example, the fact that they are considered a small operation system means that Texas gas is only responsible up until right at the parking lot basically. Everything else is the railroad commission which is the state. And so that made things a tricky conversation when we're trying to get -- trying to figure out who is responsible for what. I'd like very much to avoid that moving forward. And if we have any of those other sort of aging housing stock that might have that -- I call it frank management kind of situation where it's just patchwork and in an emergency there's just no quick fixes. So I'd like to add that.

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And then I would like to get a little more information -- councilmember alter brought up what she called an efficiency study, but I believe that the chief called it dispatch, equity optimization study and the rationale for calling for the studies and what we hope to extract from it, and how soon we will manifest anything, and that's the points of that study and those are my questions for future items.

Councilmember Kelly do, you mind if we offer vice-chair Casar an opportunity to offer future items and then I'll come back to you? >> Casar: Sure. I think for the future items discussion I'm happy to email you process items as items come up. >> Harper-madison: Sounds great, thank you. Councilmember Kelly. >> Kelly: Yes, chair, I just wanted to let you know that I checked the website and nobody

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of the present -- none of the presentations are up there, and so if the staff could put them up that would be great. >> I wanted to confirm for the committee that we will postpone post those staff presentations. And at what whatever point you find convenient for the study. >> Harper-madison: That is great and if my staff could offer me the opportunity to bend your ear for as long as you think that it takes just to get a little more background. Thank you. I appreciate it. Ms. Garret, I think that I heard you. There you are! So we'll back up to item number 4 and discuss Austin code department uniforms. >> Okay, I apologize for the audio. But I'm ready to present to you the information that you requested with the Austin code department uniforms. Next slide, please. And I lost some time here.

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The overview that I want to provide to everyone here today is basically to tell you a little bit about the history of the department, because that plays a major role of how the evolution of the uniforms came about. And then some of the challenges that we have seen and concerns with the use of a uniform. But then how we're meeting a lot of those challenges through community engagement. Next slide, please. Okay, this timeline here was added just so I could provide you a little bit of an effect of what the department has gone through. And some of the services that you can see how the evolution is. It really began in 2002, and it was not a stand-alone department, but it sat with the development services department. And it utilized staff from both health and human services as well as D.S.D. Originating with building inspectors who actually went out and conducted inspections for

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permitting. Those inspectors started out, obviously, in the field wearing basically, you know, plain clothes, a t-shirt or a polo shirt with jeans or slacks. And as you can see through the timelines here, there were a -- this timeline was really designed to indicate that we added property abatement and ordinances and land use ordinances, structural conditions and then the license and support all as new additions to our enforcement. Next slide, please. This timeline is actually going to go through letting you know how we evolved basically. As I said, the 2002 was the evolution. However, in 2004, the department at dsd added additional inspectors to help with the inspection of zone inspections. It was also at this time that they created like a polo shirt that went with the slacks and had a city emblem.

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We'll see an example of that in another slide. And in 2005 though, the department was actually moved to another department then known as solid waste services, today known as Austin resource recovery.

That included sanitariums and code inspections and it separated the building inspector perspective and made it into the co-department. In 2006 though, the first formal uniform was implemented for the department. And that was under solid waste services, again, at the time. So everything was branded under solid waste services. In 2009 though, the department became an independent department. Still utilizing all of the branding from solid waste. It wasn't until 2014, that Austin code started to rebrand and it incorporated the current uniform that you see now with the current logos.

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The next slide, please. So this slide it's kind of showing you the evolution. As you see the gentleman in the blue shirt is the original polo shirt that they had and they wore in the field. The left-hand side pocket has the city of Austin's logo on it only. And, of course, they utilized their city I.D.S that we all use today. And the uniform to the white with the white dress oxford shirt, the khaki pants, and the utility belt, was the one designed under solid waste services. Actually, the first formal uniform. Next slide. So this slide I added because I would like to just kind of indicate that this is when the Austin code department started to begin its rebranding after it was an independent department in 2009. We still had so much branding from solid waste, and they

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themselves were changing into Austin resource recovery. So a lot of our branding was all -- our letterheads and our business cards, everything was branded still under solid waste services. So at this time the department -- the code department began a rebranding of this. And in phase four, the uniforms were actually the last portion of that phase. So it started off making sure that we -- we began with the internal business cards. They started to look at a vehicle wrap and determined then the vehicle wrap. And then the last phase of the uniform actually was from an input of an internal committee that we had here with the code department. They conducted an assessment of other departments in the state, and they just compiled all of the information. They had an internal survey here from the employees at that time

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for input. And as you see that patch there, actually there was a contest actually -- an internal contest -- to come up with the independent patch they would utilize for our department, which is what we use today. Next slide. This is a result of the rebranding. And so I kind of wanted to emphasize on this is that our staff went from you call a -- like a field uniform, the gentleman with the camera has a dark Navy blue polo, it's embroidered badge. And then the khaki pants with the utility pants and the utility belt. And then on the far right, that's more of our formal dress. And then the other inspector has a polo with

the utility pants, the dark utility pants. One of the other emphasis they wanted to say is the vehicle -- if you look at the coloration on the vehicle, we tried when we were rebranding, you know,

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working with our CEO department we had -- they were looking for neutral colors. Something that didn't look like fire or EMS or APD colors but it was more of a neutral branding that was established for the code department. And the badge that you see there it's kind of a generic badge. That comes from our contractors, obviously, wherever we contract for the uniform contractors. Several of the city departments utilized this badge with the exception of the fact that it has their department and name. That's Austin public health inspectors, animal control. So we all have very similar badges. Next slide, please. So one of the things that the committee did see, you know, they did their assessment and out of this assessment, what came about from their findings were that they had the pros and the cons of the use of the uniform. And as you can see there, the

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primary pro was safety. They felt that having and utilizing a uniform in the field helped with an amount of safety for the inspectors. Also uniformity in appearance. There's several departments, city departments, that you can recognize and say oh, that's -- that's AE, that is animal control. So the uniformity in appearance was another major factor in promoting the uniform. Also easy identification as a city employee. When we're out there in the field and we're representing ourselves as a city employee and we're having connectivity with the community every day, recognition as a public official while performing your duties, and many staff members felt that it was also indicating that, you know, we were there as part of a service to the community, but part of the city performing that duty. Another important factor is the

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identification during special events. That probably should be associated with the safety issue. We work the pace team which is the public assembly code enforcement team during special events, and many times during these special events what we find is because of the crowded conditions going into the bars and looking for occupancy with Austin fire department or when we're out on the Gaters, if you separate it's really difficult to find your group so it's really assisted in identification. And then another factor was that when staff goes out in the field they're exposed to a lot of elements many times. So that was one of the concerns too, especially when we were responding to COVID complaints. They didn't want cross-contamination of any sort, so it really helps the employees making sure that they keep their families safe as well. The cons -- of course, mistaken

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identity for law enforcement. We have seen that as a challenge sometimes. And then some of the things that we have noted are sometimes some of the communities that we do service, there is some fear in some communities. We see that maybe as sometimes it's a language barrier. Sometimes it's just not -- maybe not a trust, and they feel that we may be law enforcement. So that was another concern. Of course, budgetary impacts always are impacted there. And then some inspectors said that it could be uncomfortable during certain weather conditions. Our first uniforms actually were pretty hot. They were totally polyester and that was kind of changed. Next slide, please. So with understanding that we do have these challenges, one of the things that our department has done though -- we've definitely made strides in working with the community and gaining the trust and confidence of the communities we serve.

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That is going to occur, you know, there are times when we may be mistaken for law enforcement. There may be times when we sense that there's uncomfortableness in communicating with our staff, but we do improve a lot of it -- we've increased our presence at community events. I would say that we probably attend maybe two to three events a month. We are part of a major stakeholders meetings that we have every month specifically geared with many of the repeat offender properties where we do encoincidenter some of these challenges and we work with the stakeholders and then the advocates that help the stakeholders. Many times they'll meet us out there in the field to help to be the middle person for us. And we are in attendance to certain neighborhood associations and we have been added to their monthly meetings so we do give updates in several

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of those associations. We have language accessibility and translation services afforded to all of the inspectors and that has been a really helpful deal for us because obviously we -- and it's various languages, but Austin is so diverse, that we are trying to make sure that we have reached everyone out there. The implementation of virtual inspections has assisted us in building a strength with the community as well. Many -- especially during covid, where people wanted to make reports, but didn't quite feel comfortable, the virtual inspection assist. Of course we provide education materials. We have a web page, multilingual. We have now the open data portal for the community to be able to view their case status. That was very essential for us during the inclement weather conditions. And we have a code connect line. So we're constantly, constantly trying to improve that, and we are in the community as often as

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we can to build that gap and to gain that confidence. And we've actually seen an increase of requests for us in the community. Next slide. So this last slide basically is just a conclusion of it, but I just wanted y'all to see the diverse look that we have in the field. We have the blue polos with the khaki pants. We also have the formal uniform that you see on the bottom as well as the one I'm wearing. But our staff really - I know -- and several of these people in several of these pictures you do not see a utility belt. We do utilize a utility belt for what is required for our duty, just like several departments, our guys, you know, they stay in touch by having a cellphone. We also have a handy talkie that they carry and they also have everyday daily tools that they keep on that belt, measuring

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tapes, thermometers, and so it's the essential equipment that they need. And with that I'll open it up for any questions that you may have. >> Harper-madison: Thank you so much for this presentation. It's been really helpful and I'm very glad that we got your audio working again. >> Me too. >> Harper-madison: I have a few questions, and I would defer to my colleagues for now. Colleagues, do you have any questions? Okay. I can't see our vice-chair. So I'll just go ahead and get it started and if he has questions he can follow-up. You don't have to pull the slide back up, but I'm just trying to figure out the implications of a couple of things that you said. The thing about cross-contamination left me scratching my head. I don't quite know what that means. For example, if my husband, a firefighter -- if they're exposed to, let's say, some sort of blood born illness or

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bedbugs, that happens often, and they wash their uniforms at the station. He won't bring that home. But with covid concerns, they did the same thing. I'm trying to figure out is there -- does code have the ability for -- its workforce to wash at a station or are they still taking those things home? So I don't understand the cross-contamination. >> Yes, ma'am. We do not have accessibility for any of that. They take their clothes home. Many of the staff, they basically have said they either strip down in the garage and take that off and wash the clothes separately from their family's clothes. So we do not have that. >> Harper-madison: So I guess that I just don't entirely understand how the formal uniform offers any assistance in the way of cross-contamination? >> Yes, the formal uniform is just utilized for presentation

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purposes, pretty much going to neighborhood association meetings. It's just a more formalized one. I would have to say that maybe 85% to 90% of our staff utilize that field, the dark polo utility. But I've also heard from staff that, you know, sometimes they feel more comfortable with the button down shirt. And there's just a slight difference with that type of material and some of it -- some of it stretches a little better. So I think that right now our policy doesn't say that you must wear this specific one. It just -- it's their choice, the employee's choice. >> Harper-madison: I appreciate that. I think that part of when we originally started this conversation, it was the direct result of me talking to -- relatively a large number of your workforce and having them express to me anecdotally they don't want to look like law enforcement when they're in the field, that it impedes their ability to do their jobs.

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When you said the thing about safety, it just doesn't seem like the two -- it seems that there's a contradiction. And I just wanted to see what would be the best way for us to get a better sense of where the workforce is, you know, do they feel more or less safe when they go into communities and are perceived as law enforcement? Because I can see the rationale behind, you know, looking official, and maybe even somehow pseudo law enforcement -- yeah, I can see how there's some folks who might feel more secure or safe, but certainly that was not my experience with the folks that I talked to. So I just -- but I don't want to have you saying what you think that the perception is or acm Arellano saying what he thinks that the perception is. You know, I would like to get a more scientific assessment of where the workforce is on the uniforms. And I wonder if that's a survey that we could conduct? Or is that -- >> Yes, ma'am.

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So mayor pro tem, we are actually working on a survey and putting it together right now. And my understanding is that it should be out by September. So that's the timeline I have right now. But, yes, definitely, we are already working on that. >> Harper-madison: Awesome. That's helpful. We're on the same page then. And then my last question -- because I think that you sort of answered -- I think that you sort of answered one of the other questions that I had. And one of my last questions is about budgetary impact for the department and the city of Austin. Is there something comprehensive that we can look at that indicates what the cost for uniforms are? What's the impact comparatively from where we were to where we landed with the transition to the more, you know -- I keep saying formal -- I think that you know what I mean -- the not regular button up and khaki pants. So as we made that transition, what was the budgetary impact to the department and to the city

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and continues to be? And then I guess that I just would like to know what the difference is. I'd like to see a comparison in cost. >> I can definitely provide you -- I will get that from our finance. The original cost for the initial one. The initial one with the white shirt and the cargoes. And then when we did our rebranding to see that difference in costs. I can provide you that. >> Harper-madison: I think would be very helpful. And then if we could also see, you know, as we approach -- as we're approaching the budget season it would be good to see what are the financial implications of our investment in this particular iteration of the uniform. And then I think that I'll ask some other departments what are the implications of the uniforms that they purchase for the workforce and see if there's -- see just how they compare. I'd be curious to see that as well. And I think that all in all that was the last of my questions.

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I got -- I got the impression when you originally said uniformity in appearance -- I think that I misunderstood the rationale there, but as you were speaking I think that I found my way back to understanding what it is that you were attempting to say there. >> Yes, ma'am. >> Harper-madison: If there aren't any other questions we might have gotten ourselves back on track and maybe finishing early. So let's see -- our vice-chair -- all right, well, if you don't have any questions, councilmember Kelly, I think that -- oh, -- >> Casar: I have been here but I had my camera off but, no, I don't have any questions. You covered it. >> Harper-madison: Well, everyone gets to reclaim 15 minutes on their Monday, and it just started raining so anyone that needs to get home from city hall, that is a considered. Councilmember Kelly I know that you have a long drive. I appreciate it.

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I'm sorry, there's one last thing that I forgot to add as a point of consideration. It was about -- -- oh, chief brown talked about the voluntary registration for reverse 911. I'd like to talk about that some more and see what it is that we can do on our end to make sure that people understand all of the options that they have to be as informed as possible. So if we could bring that up again later, that would be great. >> Casar: That would be useful, chair. You know, I had a friend who recently went to see family in California and my understanding is that as soon as they landed they got a text about covid-19 there. I don't think that we have that kind of a system. And that kind of a system, if it's that automatic, then as soon as they were in that community they could get a text,

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those sorts of systems could be particularly useful, particularly in the winter storm experience capacities. >> Harper-madison: We will look for the best way to post that on our agenda but that is something that I would like more information about also. And for those same reasons. I think that we

have missed some opportunities to inform more people, more efficiently and more quickly.

Councilmember Kelly? >> Kelly: I was just going to say back when I worked in emergency management the technology was so different, that it would be great to see how it changed over the years and how we could better help to protect our residents. So thank you for bringing that up. >> Harper-madison: All right, then if there's nothing else, I think that I'm going to go ahead and wrap it up. So if there's no objection, we are adjourned at 3:48 P.M. And thank you, everybody, for your time and I hope that you have a great rest of your day. Bye, everybody.