For the City and County of San Francisco

The Merger of Emergency Medical Services
and the San Francisco Fire Department:
Match Made in Heaven or Shotgun Wedding?

Released June 2004

Pursuant to State law, reports of the Civil Grand Jury do not identify the names or identifying information about individuals who provided information to the Civil Grand Jury.

Departments and agencies identified in the report must respond to the Presiding Judge of the Superior Court within the number of days specified, with a copy sent to the Board of Supervisors. As to each finding of the Grand Jury, the response must either (1) agree with the finding, or (2) disagree with it, wholly or partially, and explain why. Further, as to each recommendation made by the Grand Jury, the responding party must report either (1) that the recommendation has been implemented, with a summary explanation of how it was; (2) the recommendation has not been implemented, but will be implemented in the future, with a timeframe for implementation; (3) the recommendation requires further analysis, with an explanation of the scope of that analysis and a timeframe for the officer or agency head to be prepared to discuss it (less than six months from the release of this Report); or (4) the recommendation will not be implemented because it is not warranted or reasonable, with an explanation of why that is. (Cal. Penal Code, secs. 933, 933.05.)
This report of the SFFD and EMS merger is issued by the 2003-2004 Grand Jury with the exception of one member of this Grand Jury who is an employee of the San Francisco Fire Department. This Grand Juror was excluded from all parts of the investigation, which included interviews, deliberations and the making and acceptance of this report. This report is based on information obtained from outside sources with none of the information being obtained from the excluded Grand Juror.
SUMMARY OF RECOMMENDATIONS

1. The SFFD and the DPH should establish specific criteria for measuring the success of the merger and for determining when it is complete.

2. There should be stronger medical oversight of the SFFD Emergency Medical Services (EMS).

3. SFFD leadership should define and communicate the values of the Department to ensure that EMS is at least on a par with fire suppression.

4. Resource allocation should reflect the shift in workload from fire suppression to EMS. The Mayor, Board of Supervisors and Fire Commission should direct and support the Chief to make the necessary resource allocation changes.

5. SFFD needs to take immediate action to address the shortage of firefighter/paramedics through recruitment, retention and cross training.

6. SFFD leadership must put an end to the harassment of firefighter/paramedics.

7. SFFD should provide better management training for all officers. It should hold officers accountable for carrying out their supervisory duties.

8. The Mayor should investigate why promotional examinations have not been given in SFFD.

9. The Mayor should investigate why the Civil Service Commission implemented a certification rule favored by neither management nor labor; in effect, the new rule makes everyone who takes the examination eligible for promotion.

10. SFFD needs to determine the extent of all on-duty alcohol consumption and drug abuse problems and should institute policies and procedures to deal with the problem effectively. There must be no tolerance for on-duty substance abuse.

11. The Mayor should initiate a comprehensive, in-depth review of SFFD by outside professionals, similar to those conducted in Chicago and Boston.

GLOSSARY

**Acting Officer** – An officer or other member designated by Department order to perform duties at the next higher level of authority. An acting officer is paid at the higher level.

**ALS** – Advanced Life Support. Persons trained in ALS can provide high-level emergency medical service. This includes the ability to start intravenous lines, administer medications, place endotracheal tubes (artificial airways that pass through the larynx), provide advanced cardiac monitoring, and apply manual defibrillation.
**ALS engine** – An engine staffed with an officer, a driver (firefighter), one firefighter-EMT and a firefighter/paramedic. An ALS engine is equipped with a locked drug box containing medications needed in providing ALS care. Twenty-one of the City’s 42 fire stations are equipped with ALS engines.

**Ambulance** – A vehicle equipped to assess, treat and transport medical patients. Also known as Medic Units, they carry some firefighting equipment to provide medical and rescue support. The SFFD has 19 such units that are staffed by one firefighter/paramedic and one firefighter/EMT. The SFFD also staffs one or two ambulances per day with two paramedics. These ambulances provide ALS treatment and medical transport and carry less fire suppression equipment than Medic Units.

**BLS** – Basic Life Support. Persons trained in BLS can provide Cardio-Pulmonary Resuscitation (CPR), basic first aid and patient transport, and can use an external defibrillator.

**DPH** – Department of Public Health.

**EMS** – Emergency Medical Services.

**EMT** – Emergency Medical Technician. A person trained and certified in BLS. SFFD requires that all new firefighters must have EMT-1 licensure. Currently, 74% of SFFD firefighters are EMT-1 certified.

**Emergency Medical Response Times** – The San Francisco Emergency Medical Services Agency of the DPH has performance standards governing the maximum allowable elapsed time, from call to arrival of the first responder to medical emergencies. The SFFD responds to two types of calls, Code 2 and Code 3. Code 2 calls are non-life threatening; Code 3 calls are those that are life threatening. The SFFD measures 3 responses to Code 3 calls:

- Responders capable of performing BLS and defibrillation. Response time is 5 minutes.
- Responders capable of performing ALS. Response time is 10 minutes.
- Responders capable of patient transport. Response time is 12 minutes.

**Engine** – A fire suppression apparatus staffed by an officer and three firefighters and equipped with a pump, hose and a water supply. Each of the 42 fire stations in San Francisco has an engine.

**Firefighter** – A member trained in fire suppression.

**Firefighter-EMT** – A member trained in fire suppression and BLS.

**Firefighter-Paramedic** – A member trained in fire suppression who is also a licensed paramedic capable of delivering ALS emergency medical care as well as BLS.

**Heavy Rescue Squad** – Staffed by an officer, a driver (firefighter) and two firefighter EMTs, the Department’s two rescue squads are first responders on medical calls. The Rescue Trucks are specially equipped with infrared camera, Jaws of Life and scuba gear, as well as medical equipment and defibrillators. Rescue squad members are trained in scuba, surf, hazardous materials, cliff, tunnel and confined space rescue.
Like Work Like Pay – A short-term acting officer assignment, usually for a day at a time. The pay is at the higher rate for time worked only.

Medic Unit – A staff of either two firefighter/paramedics or one firefighter/paramedic and one firefighter-EMT: medic units provide ALS treatment and transport of ALS and BLS patients suffering in medical emergencies. Medic units also carry firefighting equipment and can provide medical and rescue support at fires and other emergencies. The SFFD has 19 such units. The term “ambulance” is used in this report to mean Medic Unit.

Member – Officers and other personnel of the SFFD.

MOU – Memorandum of Understanding between the City and County of San Francisco and San Francisco Firefighters Union, Local 798, IAFF, AFL-CIO.

Provisional Officer - A temporary officer who is a step closer to permanent status than an Acting Officer. The member is appointed by the Chief for up to 3 years or more with approval of the Human Resources Director. A physical examination is required for a provisional officer appointment. Provisional officers are paid at the higher level when on duty and on vacation or sick leave. A provisional officer who retires will receive retirement benefits based on the higher salary.

Truck - Called “hook and ladder” by laymen, trucks are staffed with an officer (lieutenant or captain), one driver firefighter, one tiller firefighter, one firefighter-EMT and one firefighter. Trucks carry ladders and other equipment and are used to provide ladder access, rescue and ventilation.


OVERVIEW
The San Francisco Fire Department (SFFD) consists of a diverse group of brave men and women, the majority of whom are dedicated to protecting the lives and property of the citizens of San Francisco. They provide protection from fire and natural disasters, provide life saving emergency medical services and prevent fires. The leaders as well as the rank and file of the Department treated the Civil Grand Jury courteously and helpfully. Our hope is that this report will result in the elimination of the problems that are currently keeping the Department from achieving its potential.

The main focus of this Civil Grand Jury investigation is the status of Emergency Medical Services (EMS) that merged with SFFD in 1997. This primary objective led us to focus on eight key areas:

1. The status of the merger and whether its objectives have been met. The main objectives were to shorten response times to calls requiring emergency medical services and to improve coordination and communication between Fire and EMS services by linking them to the same call and dispatch system.
2. The culture of SFFD and the firefighters union, local 798. SFFD has been described by many as entrenched and resistant to change. The union was cited by nearly everyone interviewed as being an impediment to the successful merger of the two services.

3. The allocation of resources, the adequacy of resources allocated to the EMS mission of SFFD, and the politics surrounding these issues.

4. Staffing, recruitment and retention of firefighter/paramedics, and cross training.

5. Allegations of firefighter/paramedic harassment by firefighter co-workers.

6. The ability of Department leadership to successfully integrate two services into one team and whether officers receive adequate leadership and management training.

7. The extensive number of temporary officer appointments in SFFD and the failure of the Department to administer promotional examinations.

8. On-duty alcohol consumption and substance abuse.

The Grand Jury found that the two main objectives of the merger have been achieved: 1) improved response times to emergency medical calls and 2) a single call and dispatch system for fire and EMS services. However, much remains to be done. EMS is treated like a poor stepchild in SFFD. Few in number, the firefighter/paramedic providers of EMS are surrounded and led by firefighters and firefighter officers who have a limited appreciation of EMS work. The planners of the merger did not establish criteria for determining success or failure. Medical oversight of EMS is weak and limited to monitoring response times and medical quality control. These issues are important, but there needs to be broader oversight to ensure that the EMS needs of San Franciscans are properly addressed.

The culture of SFFD values its fire suppression role above all others and is traditionally resistant to change. Local 798 is strong in numbers, financing and political clout. Their main focus is on maintaining the status quo and protecting firefighter jobs to the detriment of the EMS mission. Because of Local 798’s political power, making necessary improvements to SFFD will be difficult in the face of their opposition.

The majority of SFFD resources and staffing are allocated to the fire suppression mission in spite of the fact that the majority of the workload of the Department is EMS. Firefighter/paramedic attrition is high, resulting in heavy workloads for those who remain.

In addition to heavy workloads, firefighter/paramedics are subjected to on-going harassment in some stations. Harassment and workload are the major causes for their leaving the Department or returning to firefighter status. From the Fire Commission down through the officer ranks, SFFD leadership has failed to eliminate harassment.

Captains and/or lieutenants are the commanding officers in fire stations. Over half of captains and more than a third of lieutenants positions are filled with temporary appointees who have been given no management training. Management training that is provided focuses on fire suppression and report writing and is provided only every other year. Consequently, many
temporary officer appointees do not receive even minimal training before assuming command. They are ill-equipped and frequently reluctant to carry out the responsibilities assigned them. Officers temporarily assigned to a given fire station often avoid responsibility for problem solving and conflict resolution by not meting out appropriate discipline. Their superior officers have not held them accountable for shirking responsibilities.

Many officer appointments in SFFD are temporary because promotional examinations have not been given for as long as ten years—for instance, for the rank of captain. A lieutenant’s promotional examination has not been given since March 1997. Consequently, temporary appointments are made by the Chief without benefit of eligibility lists of members who have studied for and passed an examination. This violates a Civil Service Commission rule that requires examinations for each promotive rank in SFFD at least once every five years.

Without examinations, there are no eligible personnel lists from which to make permanent appointments. In an organization that promotes its employees on the basis of merit and achievement, lack of promotional examinations and the ensuing lack of permanent promotions based on merit seriously weaken the officer ranks and the Department as a whole.

The most recent examination was given in April of 1997, for the rank of Battalion Chief. It is highly suspicious that examinations have not been given since the merger occurred.

We did not set out to investigate on-duty alcohol consumption or substance abuse but the number of interview subjects who raised these issues as serious problems in SFFD left us no choice. During the course of our investigation, a number of incidents involving on-duty alcohol consumption and substance abuse were reported on television and in the newspapers. Investigations by SFFD uncovered several instances of on-duty alcohol consumption and substance abuse. Numerous interviewees reported blatant on-duty drinking in certain stations and covert drinking and substance abuse in others. This situation poses a serious danger to SFFD personnel and to the citizens of San Francisco. In addition, it is a significant morale problem.

BACKGROUND

Following a national trend, the Department of Public Health (DPH) and the SFFD agreed to merge EMS into the SFFD in the late 1990s. The merger was seen as a way to get better and faster deployment of EMS services and to better utilize the rich resources of SFFD.

Representatives from DPH and SFFD planned for the phased merging of the two services. DPH paramedics joined the SFFD in 1997, and were given the choice to remain as paramedics or to be fully trained as firefighters. Firefighters were given the opportunity to become cross-trained as paramedics. Members who cross-trained were then eligible to serve in the newly created firefighter/paramedic rank. Cross-training was encouraged and incentives were put in place in addition to a 15% higher salary for firefighter/paramedics. Members who can both fight fires and deliver ALS emergency medical services are essentially performing two jobs for a salary that is 15% higher than that of a regular firefighter.

What was not planned for was the culture clash that occurred between the two services. Also unanticipated was the extreme reluctance to change that is characteristic of SFFD (and fire departments in general). The planners did not establish criteria for measuring the merger’s success or failure.
The SFFD officers in fire stations who were responsible for the day-to-day functioning of the Department, were not adequately prepared or trained to integrate EMS into their stations. Firefighters thought the merger was saving the jobs of paramedics. Paramedics thought the merger was saving SFFD from having to cut fire stations.

Since the merger, the Department has had three rather short-term Chiefs. As a result, continuous, long-term leadership at the top and a shared vision for the SFFD has been lacking. Chief Joanne Hayes-White, appointed in January 2004, is the fourth Chief since the merger took place in 1997.

A lack of strong leadership has allowed for conditions in the Department, which adversely impact the integration of EMS and fire suppression into an effective team. Officers are not trained in team building or conflict resolution and are not held accountable for their actions. In this environment, harassment of firefighter/paramedics goes unchecked. Department leaders have also ignored and/or covered-up the problems of on-duty alcohol consumption and substance abuse.

To remedy these long-standing, deep-seated problems will require very strong leadership. Many of the problems SFFD faces have been faced by other jurisdictions; some are unique to SFFD. Cities like Boston and Chicago have benefited from in-depth reviews of their Fire Departments by outside professionals.

SFFD has undergone a number of reviews by the Budget Analyst’s Office. In October of 2003, the Board of Supervisors requested a review by the Controller’s Office. The resulting report, “A Review of the San Francisco Fire-EMS System” was published on April 28, 2004. Concurrently, the Grand Jury conducted its investigation. All of these reviews have been limited in scope and in timeframe. And, in the case of the Grand Jury, using modest resources. Although we uncovered several serious problems, we found others that we did not have the time or expertise to review. The inefficient and wasteful practices noted by the Budget Analyst’s and Controller’s reports need to be addressed. We believe these problems warrant a comprehensive review of SFFD by outside professionals, such as those conducted in Chicago and Boston.

The primary focus and concern of this Grand Jury is that no one in power is representing the interests of San Franciscans and their EMS needs. Resource decisions are made by fire suppression-first oriented leadership in SFFD and are overly influenced by a union concerned primarily with protecting firefighter positions.

We recognize that the new Chief was appointed in January of this year and needs the opportunity to make needed changes in the Department. A comprehensive, professional review could save time by providing a road map for eliminating problems. The SFFD has the tools, resources and people to be the best fire department in the country. We hope this report will help them to achieve that potential.

The Grand Jury recognizes that some of the recommendations made in this report require collective-bargaining negotiations. We expect that, when that is the case, SFFD leadership and the Mayor’s Office will undertake negotiations to effect the changes recommended.
INVESTIGATIVE SCOPE AND PROCESS
Members of the Grand Jury conducted interviews with representatives of:

- All levels of SFFD
- Local 798
- Deputy City Attorney’s Office
- San Francisco Budget Analyst’s Office
- City and County of San Francisco Office of the Controller
- Department of Public Health
- San Francisco City and County Civil Service Commission
- Mayor’s Office Budget Analyst staff
- Emergency Communications Department, City and County of San Francisco

Grand Jurors visited various fire stations and toured the Emergency Communications Department.

Documents examined for this report include:

- USA TODAY, July 28-29, 2003
- SF Budget Analyst’s “Management Audit of the San Francisco Fire Department,” January 2002
- Various issues of “Mainline,” publication of the San Francisco Firefighters Local 798.
- SF Budget Analyst’s “Legislative Report on the Transfer of the Paramedic Division from the Department of Public Health (DPH) to the Fire Department,” April 9, 1997
- SF Budget Analyst’s “Legislative Report on a Supplemental Appropriation to Increase the Fire Department’s Provision of Emergency Medical Services (EMS),” March 31, 1999
- SF Budget Analyst’s “Memo to Finance and Audits Committee December 3, 2003 Finance and Audits Committee Meeting”
• Consent Decree
• Transition Team Report to Mayor-Elect Gavin Newsom: “Public Safety,” January 5, 2004
• February 2, 2004 response to Controller’s Data Request from Chief Hayes-White: A Comprehensive Overview of the San Francisco Fire Department’s Staffing and Emergency Operations for Fire and Emergency Medical Services”
• Memorandum of Understanding between the City and County of San Francisco and San Francisco Fire Fighters Union Local 798, IAFF, AFL-CIO, July 1, 2003 to June 30, 2005, Unit 1 and Unit 2
• “Comprehensive Review of the Chicago Fire Department,” June 1999, Tri Data Corporation
• SFFD Drug Policy
• DPH data on cardiac survival
• “Fire/EMS Project Preliminary Findings & Recommendations,” Fire/EMS Advisory Committee Presentation, March 22, 2004, City and County of San Francisco, Office of the Controller
• “San Francisco: Mission to Metropolis,” Oscar Lewis, 1966
• March 2004 SFFD data on acting and provisional officer appointments
• “A Review of the San Francisco Fire-EMS System,” April 28, 2004, City and County of San Francisco, Office of the Controller

FINDINGS AND RECOMMENDATIONS

I. Merger of the Department of Public Health Emergency Medical Services and SFFD

The main focus of the merger planners was on the phased operational changes needed to implement the merger of the two services. While the plan was quite detailed, it did not include specific measures for success, a determination of when the merger would be complete, or who would make that determination. Any changes necessary after the merger occurred to be based on continuous evaluation of EMS delivery. The quality of medical services provided and the response time it takes to provide them are well monitored by DPH; the quality of life for those providing the service is not. Decisions regarding resources to support the EMS mission are made by the Chief of SFFD with little or no input from the DPH. There is no medical representation on the Fire Commission, which seems to mostly rubber-stamp whatever the Chief wants. Thus, there is no one with authority watching out for the EMS needs of San Franciscans or the providers of EMS.

The merger has been successful in that there is a single call and dispatch system for fire and EMS. SFFD is able to respond to medical emergencies by getting BLS and first defibrillator on the scene within 5 minutes almost all the time.

FINDINGS

1.1. The planning document for the merger, “Optimizing the Configuration of San Francisco’s Emergency Medical Services, Fire Based Response and Transportation System, Phase II Report, Amended February 1997,” (hereinafter referred to as the Phase II document), does not include criteria for success or for determining when the merger is complete.
1.2. Section 112 of the San Francisco Health Code authorizes the Fire Department to provide emergency medical services "without diminishing the authority of the (Department of Public Health) San Francisco Emergency Medical Services Agency."

1.3. Although Emergency Medical Services are provided by the SFFD, DPH is responsible for its effectiveness.

1.4. There is no consensus among the Fire Commission, the Fire Chief and the DPH on whether the merger has been completed.

1.5. The Phase II document created the position of SFFD Medical Director, who reports directly to the Director of Public Health and serves as a consultant and advisor to the Fire Chief on medical issues. The responsibilities of the position are limited to quality improvement, medical control and accountability, and compliance with all applicable regulations and statutes. The SFFD Medical Director does not have a policy advisory role in SFFD and is not paid by SFFD. (See Appendix A, Phase II Organizational Chart.)

1.6. There is no reporting relationship between the Fire EMS Medical Director and the DPH EMS Medical Director who, as the head of the Emergency Medical Services Agency, is otherwise responsible for all EMS in the City and County.

1.7. The Chief of EMS in SFFD is one of eight division chiefs who report to the Chief of Department through the Deputy Chief of Operations. (See Appendix B, SFFD 2004 Organizational Chart.)

1.8. Although 70% or more of the calls to which the Department responds are EMS in nature, the fire suppression mission is valued above EMS by Department leadership, ranking officers, Local 798 and many rank and file.

1.9. Calls for EMS average about 200 per day, whereas those for actual fires (as opposed to false alarms and other calls that are counted as fire suppression responses) are one or two per day citywide.

1.10. Numbers of fire suppression calls are inflated. For example, according to the Controller's Office report, "A Review of the San Francisco Fire-EMS System, April 28, 2004 (hereinafter referred to as the Controller's report): "suppression, as a category, includes a number of response types not related to fires; medical, as a category, includes medical responses only."

1.11. The Controller's report also found that 47% of the fire suppression workload is in responding to street box and commercial alarms. Twenty thousand responses a year or nearly 25% of suppression workload are for street box alarms. Ninety-five percent (95%) of street box alarms are false. Of those that are not false, 80% are calls for medical attention.

1.12. The Controller's report notes also that all alarms "are typically responded to with both a truck and an engine and are dispatched as highest priority (Code 3)." A Code 3 response to alarms seems excessive given the high percentage of them that are false.
1.13. Firefighter/paramedics are treated like second-class citizens by their firefighting peers and some officers. (See specific examples in the section on harassment.)

RECOMMENDATIONS

1a. SFFD and DPH should establish specific criteria for measuring the success of the merger. They should determine the steps necessary to complete the merger. Steps to be taken and the establishment of timelines should be delineated and agreed upon as soon as possible.

1b. Once criteria and timelines are established, the Chief and the Fire Commission should be held accountable by the Mayor for achieving them.

1c. The Mayor should appoint a health professional, preferably one with Emergency Medical Services experience, to the Fire Commission.

1d. The Fire and Health Commissions should meet jointly at least quarterly for better oversight of SFFD EMS.

1e. Department leadership should define and communicate the values of the department so that EMS is seen to be at least as important as fire suppression, as stated in the SFFD’s mission statement. The Fire Commission, the Chief and Department leadership should promote and support EMS by communicating the value of its mission throughout the Department.

1f. Given that most alarms are false and those that are not are medical in nature, SFFD should respond with appropriate staff and equipment.

REQUIRED RESPONSES

Mayor – 60 Days
Fire Chief – 60 Days
Director, Department of Public Health – 60 Days
Fire Commission – 60 Days
Health Commission – 60 Days

II. Union and Cultural Impediments to the Integration of EMS into the SFFD

The two most frequently cited impediments to the integration of EMS into SFFD were the Union and the culture clash between the two services. Descriptions of the two cultures ranged from “old school versus stepchild” to “jocks versus brains.” The overriding description of the culture of SFFD is one of entitlement, entrenchment and reluctance to change or to try anything new. Reluctance to change as a historical characteristic of the SFFD was rather proudly confirmed by a union representative. A key code of the culture of the Fire Department is never to complain about conditions in the Department and particularly, never to air SFFD problems in public. Anyone breaching this code is a “snitch.” Based on articles in the union publication, “Mainline,” Local 798 leaders believe that maintaining this code is more important than eliminating on-duty alcohol consumption and substance abuse from the SFFD.

Those interviewed thought it would take very strong leadership, indeed, to overcome these two factors.
FINDINGS

2.1. Local 798 has been cited at all levels within and without the Department as a major impediment to the integration of EMS into the Department.

2.2. Local 798 and a vocal core of SFFD personnel perpetuate a culture that values fire suppression over emergency medical services.

2.3. An article in the November/December 2003 issue of “Mainline,” a Local 798 publication, targeted two EMS officers, accusing them of illegitimately negotiating with the City as representatives of the Department. In a letter to the Fire Commission a DPH official subsequently refuted the allegations. Shortly after Chief Hayes-White assumed office, these two EMS officers were demoted and reassigned. Whatever the reasons for the reassignment, the perception is that the demotions were made to satisfy Local 798.

2.4. Leadership of Local 798 has been accused of trying to intimidate firefighter/paramedics and other members of the Local by publicly accusing them of being “snitches” in Union meetings.

2.5. The Secretary of Local 798 labeled SFFD personnel who speak out and report on-duty drinking as “snitches” in the February/March issue of “Mainline,” the publication of local 798.

2.6. The Chief’s response (as quoted by the 3/26/04 San Francisco Chronicle) reminded members that they had an obligation to report violations through the chain of command. In addition, she said that retaliation or threats against those who report such violations is also a violation. Many saw this as a weak response to the Union. Further, her comments fail to recognize that the reason members have gone outside the Department chain of command is because the Department has failed to deal with the problem.

2.7 An article in the April/May issue of “Mainline” discusses the gatherings firefighters have when a member retires or dies and the feelings of pride the gatherings engender. The author seems to equate the recent termination of a probationary firefighter, who tested positive for alcohol levels in excess of SFFD regulations to termination due to death or retirement. The final sentence, “Are YOU finally PROUD?” is presumably directed at those whom the author feels are responsible for reporting that the firefighter was under the influence of alcohol.

RECOMMENDATIONS

2. Department leadership should confront the commonly held perception that Local 798, rather than the Chief, is “running the department.”

REQUIRED RESPONSES

Fire Chief – 60 Days

III. RESOURCE ALLOCATION AND POLITICS

The Department allocates the majority of its budget, staffing and other resources to the fire suppression mission, even though that workload now represents a fraction of the demand for SFFD resources. Local 798 and its political allies support the status quo, making needed changes in resource allocation difficult.
In addition to the Civil Grand Jury’s findings, the Controller’s Office April 28, 2004 report makes many well-founded recommendations for workload-driven resource allocation. If implemented, many of their recommendations would result in budgetary savings and a more efficient Department.

**FINDINGS**

3.1. The “Fire/EMS Project Preliminary Findings and Recommendations of the Controller’s Office,” presented on March 22, 2004 states, “with 1150 firefighters and 250 firefighter/paramedics stationed at fire stations... SFFD staffing is weighted towards suppression activities.”

3.2. Although current Department leadership maintains the merger will be complete when there is a firefighter/paramedic on every engine, there are no plans to hire additional firefighter/paramedics in the near future.

3.3. The current and previous administrations cite the higher cost of firefighter/paramedic salaries as a budgetary reason for not hiring more of them. However, a firefighter/paramedic is able to provide both firefighting skills and Advanced Life Support (ALS) services at a cost of approximately 15% more than a regular firefighter.

3.4. Firefighter/paramedics are trained in ALS. This enables them to start intravenous lines, administer medications, and place endotracheal tubes (artificial airways which pass through the larynx), provide advanced cardiac monitoring, and apply manual defibrillation.

3.5. In fiscal year 2002-2003, there were 138,171 medical responses by the SFFD. Of these, 77% (or 106,205) were for ALS emergency medical services.

3.6. Twenty-one (21) of 42 functioning fire stations in San Francisco are equipped with ALS engines. An ALS engine is one that is staffed with a firefighter/paramedic as well as two firefighters and an officer. The engine is equipped with a locked drug box containing medications that may be needed in providing ALS medical care. Many Bay Area jurisdictions have only ALS engines.

3.7. In the 7 years since the merger in 1997, SFFD has had three short-term Chiefs. The leadership necessary to successfully accomplish the merger of EMS into the Department was not in place. The Department now has a new leader who should be charged with achieving a successful merger and be supported in those efforts.

3.8. There is a widely held belief that nothing will change in the SFFD, particularly the allocation of more resources to EMS, because Local 798 will oppose it.

3.9. Local 798 is active and powerful in local politics. Local 798 has the ability to “put the bodies out” in support of politicians and issues, as President John Hanley was quoted by Matier and Ross in the March 26, 2004 San Francisco Chronicle. The City needs the cooperation and “give-backs” of Local 798 and other unions in order to balance the budget.

3.10. Changes to the current system in SFFD or reductions in service, no matter how warranted, are political hot potatoes that bring out predictable, knee-jerk reactions from politicians.
For example, the Matier and Ross column cited above also quotes Supervisor Tony Hall as saying he “vowed to fight” the Controller’s recommendation for alternate staffing among three underutilized fire stations. This same column stated that representatives from Local 798 would be out in support of Supervisor Hall’s re-election campaign kick-off the following Tuesday. Supervisor Hall’s quote appears in the April/May issue of “Mainline” and has become the rallying cry of Local 798.

3.11. San Francisco firefighters are paid 8.6% higher salaries and work an average of 7.3% fewer hours than firefighters in comparable fire departments according to the Controller’s Report of April 28, 2004.

3.12. The same report states that San Francisco has more fire stations per square mile and a higher per capita budget by far than comparable jurisdictions.

**RECOMMENDATIONS**

3a. Resource allocation and staffing should reflect the Department’s change in workload from fire suppression to EMS.

3b. The Mayor, Board of Supervisors and the Fire Commission should direct and support the Chief in making resource allocation changes that properly support the EMS mission.

3c. The Board of Supervisors mandated the review of SFFD recently conducted by the Controller’s Office. The Board should now act on and direct the Chief to implement the recommendations.

**REQUIRED RESPONSES**

Mayor – 60 Days
Board of Supervisors – 90 Days
Fire Chief – 60 Days
Fire Commission – 60 Days

**IV. RECRUITMENT, RETENTION, CROSS-TRAINING AND STAFFING**

**FINDINGS**

4.1. Currently, there are not enough firefighter/paramedics in the Department to provide adequate relief for ambulance duty. There are barely enough firefighter/paramedics to staff existing EMS equipment, let alone increased equipment and services.

4.2. In order to be eligible for promotion, firefighter/paramedics (as well as firefighters) must have completed four months of service on both an engine and a truck. The firefighter/paramedic shortage makes it difficult for them to complete such service because they are needed on ambulances or ALS engines.

4.3. The Department has no plans to hire additional firefighter/paramedics in the near future.

4.4. In spite of incentives for firefighters to cross-train and become firefighter/paramedics, poor working conditions and heavy workloads have proven to be even stronger disincentives. Although the firefighter/paramedic job classification has only been in existence since 2000,
19 firefighter/paramedics have given up their higher salaries and returned to the firefighter job classification as of December 31, 2003.

4.5. The Controller's Office's April 28, 2004 report, states that 16% of firefighter/paramedics hired from fiscal year 1996-97, to date, have separated from the Department. In comparison, the separation rate for firefighters is 7% during the same period of time.

4.6. Firefighter/paramedics in command positions can help integrate EMS into the Department and change the emphasis of the Department from fire suppression. According to the Controller's report of April 28, 2004, "current SFFD practice does not use firefighter/paramedics who are promoted to command positions for paramedic functions on engines or medic units, despite the fact that the City pays them a premium if they retain their paramedic licenses."

4.7. There are four EMS Captains supervising firefighter/paramedics who respond to approximately 200 EMS calls per day, for a ratio of one supervisor for every 50 calls. EMS Captains are not part of the staffing on the engine or ambulance; they respond in their own vehicles.

In contrast, all fire engines are staffed with one officer and three firefighters, providing a supervision ratio of 1:3. All fire trucks are staffed with 1 officer and 4 firefighters, a 1:4 ratio. Cross-trained officers would provide better supervision of EMS delivery and potentially better patient outcomes.

4.8. Firefighter/paramedics assigned to ambulances spend more time on EMS calls because they are responsible for transporting patients and for hospital admission procedures. Firefighter/paramedics assigned to ALS engines, on the other hand, provide immediate medical care and return to the station. Transport duties and hospital admission requirements can add an hour or more to a call, resulting in a heavier, inequitable workload.

4.9. The current shift of 48 hours off after a busy 24 hours on ambulance duty provides insufficient rest for many firefighter/paramedics.

4.10. Firefighter/paramedics working on ambulance duty get job burnout and leave the Department or return to firefighter status.

4.11. There are many options for alleviating workload. Some options that other jurisdictions have looked into, which the SFFD should explore, include: 1) 12 hours on ambulance, 12 on ALS engine, 2) 24 hours on ambulance duty followed by 72 hours off, and/or 3) using more private ambulance services for transport.

4.12. The issue of heavy workload for firefighter/paramedics assigned to ambulance duty has been around since at least 1997. The 1997 Phase II planning document recommended that tools be in place to evaluate, in particular, issues of workload and quality of care. The transcript from the Fire Commission sponsored EMS roundtable meeting on June 21, 2001 indicates that ambulance duty workload was still a major issue. In 2004, it continues to be a problem.
4.13. The Department has two Heavy Rescue Squads consisting of specially equipped Rescue Trucks staffed by an officer, a driver and two firefighters certified as Emergency Medical Technicians (firefighter-EMTs). Firefighter-EMTs can provide BLS medical services but not ALS. Rescue Squads are not staffed with firefighter/paramedics.

4.14. These two squads respond to the severest rescue conditions, such as extraction of people from car wrecks using the Jaws of Life, hazardous material situations, and the like. The people they rescue should have the highest level of emergency medical service immediately available to them. Firefighter/paramedics are trained in ALS and are able to provide a higher level of medical care than firefighter-EMTs. Given the types of emergencies the Rescue Squads respond to, a higher level of EMS seems appropriate.

RECOMMENDATIONS

4a. Recruitment and retention of firefighter/paramedics is a critical problem that needs immediate attention. The Department should hire additional firefighter/paramedics and/or cross-train more existing personnel to be firefighter/paramedics as soon as possible.

4b. Officers should be cross-trained as well as rank and file firefighters. Officers who are already cross-trained should continue their paramedic licensure and use their paramedic skills in their command positions.

4c. Alleviation of heavy ambulance workloads should be addressed as soon as possible. The necessity for a 24-hour ambulance shift should be reviewed as well as other options for transporting patients.

REQUIRED RESPONSES:

Mayor – 60 Days
Fire Chief – 60 Day

V. HARASSMENT

FINDINGS

5.1. Harassment is a major factor in firefighter/paramedics decision to leave the Department or returning to firefighter status.

5.2. Firefighter/paramedics are the new “whipping boys,” taking the place of women and minorities in many instances as targets for harassment. Women and minorities are in protected Equal Employment Opportunity classes. The EEO complaint process affords them recourse that is not available to firefighter/paramedics. The complaint process available to firefighter/paramedics is ineffective.

5.3. In some stations firefighter/paramedics have been excluded from meals.

5.4. Some firefighter/paramedics and women firefighters have been insulted and even shunned while on duty.

5.5. Firefighter/paramedics in some stations are routinely referred to as “f--in’ Medics” and “a-wipes.”
5.6. Harassment is tolerated or even encouraged in certain stations. Firefighters are allowed to select their station assignments and can stay at that station for their entire careers. Fire stations take on the personality of the group that is permanently assigned there, for good or ill. When the personality or culture of a station is one that allows harassment and disrespect of co-workers, the best solution may be to break up the group that perpetuates the behavior and culture.

5.7. Article 3953 of the SFFD Rules and Regulations states that assignments can be revoked and reassignments made by the Chief “for the good of the service.”

5.8. Weak leadership has allowed for a work environment that is hostile to firefighter/paramedics and women firefighters.

5.9. Ranking officers ignore bad behavior and/or apply inconsistent or no discipline. This dereliction of duty has occurred with no repercussions to themselves or their careers.

5.10. Sec. 4.108 of the City Charter states, “The Fire Commission is empowered to prescribe and enforce any reasonable rules and regulations that it deems necessary to provide for the efficiency of the Department.”

5.11. Specific examples of mistreatment of EMS personnel have been brought to the attention of the Commission and have been largely ignored. The Fire Commission’s response to harassment complaints has consisted of expressions of sympathy for the plight of firefighter/paramedics as opposed to the exercise of their powers to “prescribe and enforce any reasonable rules” that might improve conditions for firefighter/paramedics.

For example, at the 2/27/03 meeting of the Fire Commission, Commissioner Pat Norman expressed concern that the SFFD remain unified and that firefighters and firefighter/paramedics not turn on each other since the function of EMS in the Department is as critical to the people of SF as is fire suppression.

While these comments show concern and sympathy, the Commission has not taken SFFD leadership to task for the ongoing harassment of firefighter/paramedics and the failure to integrate EMS and fire suppression in any meaningful way.

**RECOMMENDATIONS**

5a. Department leadership should identify the stations where harassment is occurring. Those engaging in harassing behavior should be appropriately disciplined. The range of discipline should include suspension with or without pay and/or firing, depending on the degree of harassment. Harassers who are not fired should be reassigned to different stations.

5b. Ranking officers should be held accountable for their actions or inaction related to harassment. Officers who participate in or allow those under their supervision to participate in harassment should be disciplined. The range of discipline should include suspension without pay, demotion and/or firing, depending on the severity of the offense.

5c. The Fire Commission should hold Department leadership accountable for eliminating harassment.
REQUIRED RESPONSES:
Fire Commission – 60 Days
Fire Chief – 60 Days

VI. LEADERSHIP AND MANAGEMENT TRAINING

FINDINGS
6.1. Leadership and command training is currently offered every other year. This means that some officers assume command with no training for the role.

6.2. According to the schedule for a one-day Company Officer Management Course offered last year, only one half hour was scheduled for “Human Resources.” Course materials indicate that the focus of this module was on EEO complaints. There are no training modules in team building, conflict resolution, professional behavior, responsibility or accountability.

RECOMMENDATION
6. The Department should provide comprehensive leadership and command training for all officers prior to their assumption of command. Periodic training should emphasize professionalism, responsibility and accountability and be given on a regular, ongoing basis. Training should include conflict resolution and team building.

REQUIRED RESPONSE:
Fire Chief – 60 Days

VII. PROMOTIONS AND TEMPORARY OFFICER APPOINTMENTS

FINDINGS
7.1. No promotional examinations may be given until the Chief generates secondary criteria and submits it to the Civil Service Commission for approval. Once approval is obtained, the Department can post vacancies in the officer ranks and give promotional examinations to generate lists of eligible candidates to fill those vacancies. No permanent officer can be appointed until all of these steps are complete.

7.2. Using March 2004 data from the SFFD, Appendix C shows that temporary appointees hold 170 of 365 or 47% of all officer positions in the SFFD. One hundred and twelve (112) hold acting appointments and 58 are provisional. Captains and lieutenants typically supervise fire station personnel. Thirty-eight (38) of 69 captains or 55% have acting or provisional appointments. Seventy-two (72) of 199 lieutenant positions or 36% have acting or provisional appointments. Twenty-seven (27) of 27 or 100% of EMS-captain appointees are acting or provisional.

7.3. The Chief or her designee makes temporary officer appointments using criteria she deems appropriate. While such factors as performance and community service may enter into the appointing decision, there is no substitute for appointment from a list of eligible members who have passed a promotional examination and whose performance is objectively ranked.
7.4 The MOU provides for the filling of short-term vacancies, 60 days or less, on the basis of seniority. Long term vacancies, more than 60 days, are assigned by the Captain of the company “with due regard for seniority.”

7.5. Temporary officers are assigned to various stations as needed, as opposed to having a permanent assignment at one station. They may be assigned to a different station every time they are on duty. When presented with a conflict or a problem, they often avoid dealing with it because of the temporary nature of their assignments. “I’m just here for the day,” is the widely used and understood phrase to describe this behavior. They have not been held accountable by their superior officers for shirking responsibilities.

7.6. The officer ranks of SFFD are severely weakened by having so many long-term temporary officers. SFFD’s promotional system is designed to be merit-based, not based on seniority. The lack of promotional examinations is defeating the purpose of a merit-based system.

7.7. In addition to the reasons listed for taking the steps necessary to provide the Department with permanent officers, promotional examinations and officer selection would presumably get more firefighter/paramedics into the officer ranks, further integrating them into the Department. The fact that promotional examinations have not been given since the merger of EMS into the Department is more than a little suspicious.

7.8. The most recent promotional examinations given in the SFFD were 7 years ago in 1997, for the rank of firefighter Lieutenant. Examinations for the rank of Bureau of Fire Prevention and Inspection Captain have not been given since 1985. The most populous Captain rank has not had exams since 1994, 10 years ago. (See Appendix D.)

7.9. At least once every five years the Civil Service Commission is required to provide for examinations for each promotive rank in SFFD, according to Section 311.3 of Civil Service Commission rules.

7.10. There are potentially significant financial ramifications to the SFFD retirement budget as provisional officers are able to retire at the temporary higher rank they fill.

7.11. In February 2003, the Civil Service Commission adopted a new certification rule 313.3.4, Statistically Valid Grouping (Sliding Band). Local 798 is appealing this rule in the courts. Current SFFD leadership is also opposed the new rule.

7.12. Since the “Band” can “Slide” over the entire range of test scores, the new certification rule, in effect, makes everyone who takes the test eligible for promotion, regardless of test score.

RECOMMENDATIONS

7a. Department leadership should develop and submit secondary promotional criteria to the Civil Service Commission for approval as soon as possible. Although there is a legal appeal in process and the Department will not be able to act until this appeal is resolved, it is imperative that the Department be ready to proceed with examinations and selections after the appeal is adjudicated.
7b. The Mayor should investigate why promotional examinations have not been given in the SFFPD and determine what the financial ramifications are.

7c. The Mayor should investigate why the Civil Service Commission implemented a new certification rule that neither management nor labor want.

REQUIRED RESPONSES:

Mayor – 60 Days
Fire Chief – 60 Days
Civil Service Commission – 60 Days

VIII. ON-DUTY ALCOHOL CONSUMPTION AND SUBSTANCE ABUSE

In his book, “San Francisco: Mission to Metropolis,” Oscar Lewis talks about the historic beginnings of the San Francisco Fire Department. “The volunteer fire companies were in effect clubs, and membership in such organizations was looked on as a mark of social distinction. Their headquarters, which usually occupied the upper floor of the station houses were often fitted out with card and billiard tables, a library, a bar, and other recreational facilities.” Some SFFD members we interviewed could remember when bars were a standard feature of various stations around the City. It is a tradition that dies hard. Add the high stress level of firefighting and one understands why a conservative estimate is that 20% of those in the firefighting profession suffer from alcoholism, according to the National Council on Alcoholism (NCA) and the National Institute on Alcohol Abuse and Alcoholism (NIAAA) data.

While the Grand Jury was conducting its investigation, several instances of on-duty alcohol consumption and substance abuse were reported in the news media and confirmed by SFFD.

FINDINGS

8.1. The Department knows, or should know, it has a problem. Many SFFD personnel interviewed have witnessed on-duty drinking and other types of substance abuse. Many in the rank and file know the stations and officers that tolerate on-duty drinking. Follow up investigations by SFFD on recent tips have shown that on-duty SFFD personnel had alcohol or other substances in their systems.

8.2. Currently, Department leadership depends on tips, which are then investigated. Leadership also waits for those with alcohol or substance abuse problems to identify themselves and ask for help. The potential danger to SFFD personnel and the citizens of San Francisco is too critical for a wait-and-see approach. Procedures need to be in place to ensure that substance abuse is identified before it causes problems in the field.

8.3. In addition to being dangerous, maintaining the status quo rather than taking action to resolve the problem further lowers morale for the many members of SFFD who want to see an end to on-duty alcohol consumption and substance abuse.

8.4. The Substance Abuse Policy in place currently, was generated by Chief Robert L. Demmons in 1996. Under this policy, the Department may test for drugs only when there is “reasonable suspicion” that a person has “used an illegal/controlled substance or consumed alcohol while on duty or prior to duty.”
8.5. The MOU, section 41.1, states, "Mandatory physical examinations shall include the submission of a urine specimen for routine analysis and screening for the presence of drugs and alcohol." Mandatory physical examinations are conducted under very limited circumstances.

8.6. This limited scope of testing for public safety personnel is insufficient to prevent dangerous or deadly situations that could endanger both SFFD personnel and the citizenry. The Grand Jury believes that the potential risk outweighs privacy rights in this situation.

8.7. Identifying members of SFFD who have substance abuse problems allows the Department to refer them for appropriate treatment and potentially to retain individuals who have otherwise honorably served.

8.8. Like harassment, on-duty alcohol consumption occurs in certain fire stations. Several interviewees could identify those stations and they indicated that drinking was likely to occur at "cocktail time," during dinner and at Sunday brunch. Unannounced stations visits made by investigators at appropriate times would likely uncover the problem stations.

8.9. The current procedure of supervisors' identifying members they suspect of substance or alcohol abuse is not working. On-duty consumption of alcohol and other drug abuse has been and continues to be tolerated in some stations. Some ranking officers in these stations are part of the problem.

8.10. In some stations, alcohol consumption and substance abuse are conducted covertly. Investigator access to lockers would eliminate one means of storing alcohol or controlled substances.

8.11. Article 3946 of the SFFD Rules and Regulations allows for lockers to be opened if the member is present, or in his or her absence, in the presence of the company officer and another member of the company or other officer.

8.12. When officers were sent to stations to conduct investigations following tips, they were known to look the other way while station members disposed of alcohol. In an organization that identifies its members as "brothers and sisters," misplaced loyalty can sometimes supersede proper reporting of on-duty alcohol consumption. Officers' investigations into substance abuse and alcohol consumption lack credibility with SFFD personnel who have witnessed years of on-duty alcohol consumption with no repercussions.

8.13. Substance abuse by members of SFFD is incompatible with the duties and obligations of a firefighter.

8.14. The Demmons' policy (cited above in number 8.4) is really a statement of procedures. The current Chief has been quoted as favoring a case-by-case policy, with the appropriate discipline to be determined by her. Case-by-case review and disposition can be viewed as unfair. Indeed, that criticism has already been leveled. A policy with a range of options for discipline and a clear statement of the circumstances under which each disciplinary action will be taken offers an alternative to case-by-case evaluation and avoids the potential for favoritism or inequities found in the Chief's subjective approach.
8.15. Fire and Police Departments in other jurisdictions are dealing with or have already dealt with these same problems. The SFFD leadership should look to other departments that have been successful in resolving these problems and adopt their methods.

**RECOMMENDATIONS**

8a. The Department needs to determine the extent of on-duty alcohol consumption and substance abuse among Department personnel as soon as possible.

8b. The Department should negotiate for expanded and random drug and alcohol testing as soon as possible.

8c. The Department should establish an Internal Investigative Unit that reports directly to the Chief. Investigators trained in identifying people who are under the influence should staff this Unit. The investigators should have complete authority to make unannounced visits to fire stations and to conduct drug and alcohol tests. They should have access to lockers used by firefighters for storage of personal items.

8d. The Department needs to implement a strong, clear, and effective drug policy.

8e. The Department should institute an outreach program to help identify and refer for treatment those members with alcohol and substance abuse problems.

**REQUIRED RESPONSES:**

Fire Chief- 60 Days
APPENDIX A

PHASE II

ORGANIZATIONAL CHART
APPENDIX B

SAN FRANCISCO FIRE DEPARTMENT

ORGANIZATIONAL CHART

2004

COMMAND STAFF ONLY
APPENDIX C

SFFD TEMPORARY OFFICER APPOINTMENTS

AS OF MARCH 2004
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*Note: These are exempt positions; assigned at the discretion of the Chief.

3/9/04
APPENDIX D

SAN FRANCISCO FIRE DEPARTMENT

MOST RECENT PROMOTIONAL EXAMINATIONS

BY RANK
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<th>Exam</th>
<th>Administration Date(s)</th>
<th>Eligible List Adopted</th>
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<tr>
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<tr>
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<tr>
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<tr>
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