

Bonita Springs Fire Department ALS Certificate Request—Review & Recommendations

Issue

Bonita Springs Fire Department wishes to revise their current Certificate of Public Convenience and Necessity (COPCN) from Advanced Life Support (ALS) Non-transport to ALS Transport under Lee County Ordinance Number 08-16.

Review and Recommendation Process as per Lee County Ordinance No. 08-16

- Letter received from Bonita Springs FD on May 3, 2010. Application reviewed and request for additional information sent back on June 28, 2010. Unable to provide a recommendation whether to grant or deny the certificate request until additional information is received and reviewed.
- July 16, 2010 – Received follow-up information from BSFD.
- July 28, 2010 – Met with Commissioner Judah, Assistant County Manager Holly Schwartz, Chief Phil Kinsey, Assistant Chiefs Dan Ryan and Joe Diagle, and Fire Commissioner Steve Lohan. At this meeting, Holly suggested and Commissioner Judah agreed this issue should go before the BoCC during Management and Planning session in September (there is no August M & P scheduled).
- August 13, 2010 – County Manager Karen Hawes met with Chief Phil Kinsey, Deputy Chief Joe Diagle and Fire Commissioner Steve Lohan for further discussion and information gathering.
- September 13, 2010 – Issue was presented for consideration to the BOCC at a Management and Planning Session with the following four options. The BoCC selected option 3, recommended by staff.
 - 4 Options for the BoCC's consideration:
 1. Do not grant the certificate – Current EMS service is adequate, and the information furnished by BSFD did not provide any evidence to demonstrate the clinical need for faster service or for the increase in the number of ambulances.
 2. Grant the certificate – LCEMS would only service the Bonita Springs area under a mutual aid agreement as back-up support.
 3. **Consider a collaborative effort – LCEMS would continue to provide service and would provide one additional ambulance to be staffed with BSFD personnel for 24-hour coverage, and BSFD would provide additional 12-hour coverage in addition to the 12 hours currently provided by LCEMS. This would compliment the current two 24-hour and one 12-hour ambulances stationed in Bonita. A total of four ambulances would provide EMS coverage for the Bonita Springs area. (Legalities would need to be identified/addressed.)**
 4. Present the issue before a Hearing Officer as noted in Ordinance 08-16, Section Nine (F). The cost for the Hearing Officer would be borne by the County. The

report shall contain the Officer's findings and conclusions of fact, and a recommended order. The findings and conclusions of fact shall be binding upon the Board, but the recommended order shall be advisory only.

Staff Review

- County Staff believes LCEMS is providing adequate service to the residents and visitors of Bonita Springs. There are no major LCEMS service delivery issues countywide at this time. LCEMS does receive individual service complaints from time to time, and those are immediately addressed and resolved.
- The information furnished by BSFD did not provide any evidence to demonstrate the clinical need for faster service or for the increase in the number of ambulances to provide coverage.
- The request would create a de-consolidation of the current EMS service delivery model.
- In order for BSFD to provide this service, the residents of this district will be "double" taxed. BSFD has not provided any documented indication that the residents desire this service or to be taxed for this service.
- BSFD has indicated in a recent budget workshop that they are requesting a budget increase for FY 11. They have indicated that their operating costs to provide ALS Non-Transport will be \$132,000. The TriData consolidation study indicated if San Carlos, Estero and Bonita combined and provided EMS, the annual cost would be \$3,341,237 to \$6,077,956. It would be logical to assume that Bonita alone providing EMS would be 1/3 of the estimated operating costs.

Topics for Consideration

Consolidation of the Lee County independent fire departments has been discussed for the past 30 years. The System Planning Corporation – TriData Division, was hired by the San Carlos, Estero and Bonita Springs fire departments to complete a Cooperative Services Feasibility and Consolidation Study. It was published in December 2009. According to the Executive Summary (p. 1 of the study), it recommends that the three fire districts consolidate into a new single fire district. The Consolidation study does not recommend that the fire district provide EMS transport service.

Bonita Springs Fire Department request to provide EMS transport service is in direct conflict with the recommendations from the Consolidation study. Approval of this request will actually deconsolidate the current EMS service delivery model in Lee County. EMS is currently provided by Lee County, Lehigh Fire Department and Fort Myers Beach Fire Department.

Bonita Springs Fire Department has indicated it will take between 12 and 18 months to become fully functional if granted approval. With this in mind, if approved, Lee County would not recognize any potential budget reduction until FY 2011/12 or FY 2012/13.

Bonita Springs Fire Department has indicated in the meeting with Commissioner Judah that the ambulances they purchase will provide both fire and EMS response. In the event of a major fire, Lee County EMS will be expected to provide mutual aid. Fire response appears to be primary, with EMS response a secondary priority.

Consolidation Study Recommendations

Bonita Springs Fire Department's request conflicts with the recommendations from the Cooperative Services and Feasibility Study, December 2009, by the System Planning Corporation – TriData Division.

Below are excerpts from the Consolidation Study, along with the page reference number:

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- TriData determined that a full consolidation between the districts was operationally, and economically, the most reasonable direction for the Districts to proceed.
- EMS response should remain steady through 2013. Challenges to the countywide EMS system may provide the District with an opportunity to add EMS transportation. To effectively provide EMS transportation, six ALS Medic Units are needed.

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- Adjustments to human resources could save up to \$4,187,568 provided that EMS transportation is not provided.
- It will cost the new District between \$3,341,237 and \$6,077,956 annually to provide EMS transportation. Annual EMS revenue generation is forecast at \$2,398,510. Obviously, providing EMS will not be “profitable”. A decision to provide EMS transportation must be based on citizen needs.

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- As mentioned earlier, the citizens and citizen groups from each District played a vital role in these considerations. Each District citizen group expressed several similar thoughts and concerns:
 - General satisfaction with the fire and EMS services being provided.
 - Willing to support consolidation if it improves quality and helps control costs.
 - The importance of quality EMS response, including the rural areas.
 - Financial efficiency is an important element for any future plan.

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- Some will look at EMS transportation as an answer to job protection, an argument that is filled with holes and is usually discovered.
- The decision to seek control of EMS transportation must be based on providing quality care for the resident and business community. The offset of expenses, job savings and the need for control are false expectations that are of little benefit to the community.
- EMS Transportation – If the new District decides to pursue EMS transportation services, six advanced life support transport units should be enough to handle the demand satisfactorily.

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See next page for actual page from the study – it recommends ambulance placement. Red lettering indicates current LCEMS placement. Medic 6 was previously located at #10, but was placed in its current location to provide rapid access to I-75, especially while I-75 was under construction.

EMS Transport Unit Placement – If the new District adopts EMS transport services, six advanced life support (medic) units would be needed. Figure 23 shows the proposed medic locations for the combined fire District. Also shown is the theoretical 6-minute travel time reach for each of the proposed stations.

Figure 23: Proposed Location for Medic Units

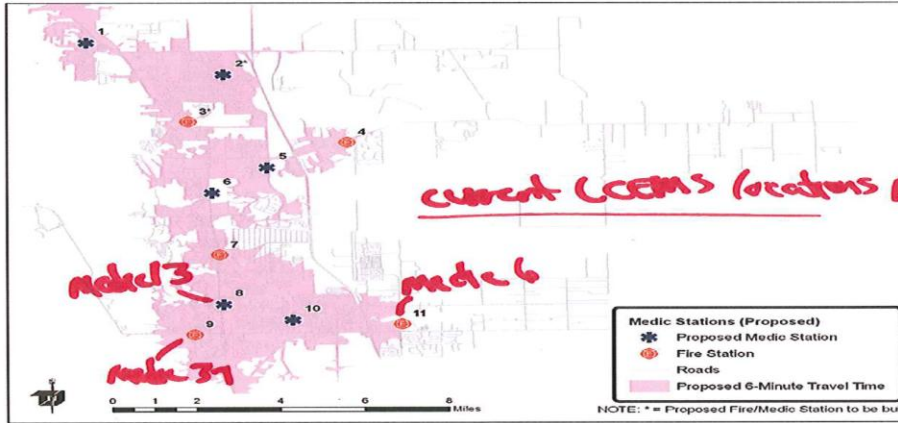


Figure 24 shows the proposed 6-minute theoretical travel time overlaid on the density of EMS incidents from recent years. The proposed travel time reach covers the vast majority of the "hotspot" areas (shown in red) and also provides some overlap coverage for those high density areas. The areas not covered by within 6-minutes are almost exclusively located in the sparsely populated areas.

While six EMS transport units would be sufficient, the new District should monitor the situation and be prepared to take action. During the busy season when the population peaks, may warrant additional EMS transport units being placed into service.

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- EMS Transportation Staffing – If the new District decided to provide EMS transportation services, six full-time units would be necessary.

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- There are two main reasons for determining whether the new District should consider providing EMS transportation.
 - The current EMS transportation system is inadequate.
 - There would be a financial incentive for providing service.

Currently, Lee County EMS is providing effective EMS to the District. The system is stressed and has been asked to take over Lehigh Acres EMS transport duties. They are legally mandated to provide EMS anywhere in Lee County. At this point, there is no overriding urgency to takeover EMS transportation.

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- The annual cost for providing EMS transportation will be approximately \$3,341,237.
- It is difficult to forecast revenues because it was difficult to determine exactly how many EMS transports would occur. We estimated the number of EMS responses, number of transports, likely percentage of payers, and the reasonable and customary charge for each transport.
- LCEMS enjoys a collection rate of 73.4% in southern Lee County. Multiplying 5,082 transports by 0.734 (collection rate) equals 3,731 reimbursable transports. 3,731 transports multiplied by \$643.00 equals an estimated collection of \$2,398,510 annually (Table 17).

- Based on the above analysis, the District will likely be able to recoup only about 72% of expenditures. On this basis, providing EMS transportation is not cost effective.
- Recommendation 46: There is no fiscal advantage for the new District to provide EMS transportation.

LCEMS Operational Costs to provide Bonita Springs Coverage

- Total personnel to staff two 24-hour ambulances and one 12-hour ambulance in the Bonita Springs area: 16 personal at total salary of \$1,365,566 – includes fringe benefits using 50 percent multiplier. This cost does not include additional ambulances that are “floated” into Bonita for coverage as needed.
- Collections from Bonita Springs ambulance billing: \$1,024,198
- Operating expense minus revenue recovery = \$341,368 annual loss

Summary

- Bonita Springs Fire Department’s request conflicts with the recommendations of the Consolidation Study.
- Lee County EMS is providing adequate EMS service to the Bonita Springs area.
- Recommend denial of request for ALS transport service.
 - Suggest partnership between LCEMS and BSFD to increase number of ambulances to “over-service” the current EMS operational demand in the Bonita Springs area.
 - This would prevent additional burden to the taxpayers by not expending the BSFD’s estimated \$1.2 million capital outlay for ambulances.