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**DEPARTMENT MEMO**

**DEPARTMENT:** Fire

**FROM:** K.T. Freeman, Fire Chief

**MEETING:** July 6, 2020

**SUBJECT:**

Consider approval of an ordinance amending Chapter 30 of the Code of Ordinances by repealing Article II “Emergency Medical Services” and enacting a new Article II “Emergency Medical Services”; and providing a cumulative clause, severability clause, savings clause, penalty clause, publication clause, and effective date. *(Second Reading) (Staff Presenter: K. T. Freeman, Fire Chief)*

**SUMMARY:**

This amended ordinance is brought to City Council pursuant to a proposed amended interlocal cooperative agreement with the organization that operates MedStar and the other local governments that participate in the MedStar group. The proposed amended interlocal cooperative agreement requires that the City pass the proposed ordinance.

In 1988, an administrative agency was created, pursuant to Sec. 791.013 of the Interlocal Cooperation Act through an Interlocal cooperation agreement, called the Area Metropolitan Ambulance Authority d/b/a Medstar, to ensure the provision of ambulance service in the Tarrant County area. In 2017, the current Revised Interlocal Cooperation Agreement and the current Uniform Ordinance was passed by the participating jurisdictions including the City, renaming the Authority to the Metropolitan Area EMS Authority (MAEMSA), establishing the First Responder Advisory Board (FRAB), providing for clarification in the relationship between the MAEMSA Board and the Emergency Physicians Advisory Board (EPAB), allowing the Authority to provide mobile integrated healthcare, and providing for other enhancements and improvements.

In 2018, the stakeholders determined that an established process was needed for input and action by the MAEMSA Board and EPAB related to personnel decisions regarding the medical director. Following many months of stakeholder collaboration and input, staff recommends the adoption of a Restated Interlocal Cooperative Agreement ("ILA") and a new Uniform EMS Ordinance ("Ordinance").

The major changes in the Ordinance and ILA include:

1. MAEMSA Board:
  - Expand the voting membership from a six member board of directors to nine members with EPAB having one additional voting member, FRAB having two voting members, and the suburban city representative being removable with two-thirds vote of the suburban cities.

- The executive staff of the MAEMSA system that will be hired by the simple majority of the board and will include the medical director, CEO, and general counsel. These positions will report directly to the board.
  - The system medical director and the CEO will be non-voting members of the board.
  - Non-voting members of the board will not have a fixed term of office.
  - The Board may add additional non-voting members as determined by a two-thirds majority.
  - The Board is empowered to add additional voting seats in connection with the admission of new member jurisdictions.
  - MAEMSA Board to adopt its own conflict of interest policy.
2. EPAB:
- Provides independent medical oversight to the system and is an advisory board to the MAEMSA Board.
  - Voting directors must live, work, or have formerly worked in the service area, with preference to those who live or work in the service area.
  - May add non-voting members with a two-thirds vote of its board.
3. FRAB:
- FRAB may add non-voting members with a two-thirds vote.
4. Medical Director:
- May be an employee or contractor of MAEMSA.
  - Responsible for the employees in the Office of Medical Director.
  - Duties updated to align with state law and current practice.
5. Other:
- Annual Uniform Schedule of Pricing Options sent to the cities by MAEMSA will no longer be required.
  - Defines the executive personnel hired by the Board – the Medical Director, CEO, and General Counsel – and the reporting structure, duties, and procedures for hiring and firing these positions.
  - Clarifies the ability of member jurisdictions to govern EMS standby care at special events in their jurisdiction.

Much of the Restated Interlocal Cooperation Agreement remains the same:

- The Authority maintains its status as the direct provider of ambulance services but continues to have the discretion to use a subcontractor should the member jurisdictions so choose through their representatives on the Authority Board.
- The Authority will continue its current practices that enhance fiscal and operational transparency, including independent financial audits on a yearly basis. The Office of the Medical Director will be part of the Authority budget and financial reports.
- The member cities continue to have discretion in providing subsidies to the Authority. The subsidy may be in any amount, with no subsidy as a required option in the Interlocal Agreement.
- The Authority will continue to provide mobile integrated healthcare. The Authority is currently providing a number of programs under this service, including 911 Nurse Triage and Home Health Partnership, and it will continue to do so.

- The Ordinance continues to carry a penalty of a Class C Misdemeanor for violations thereof. Under the Ordinance, it is unlawful, among other things, to knowingly give false information to induce the dispatch of an ambulance or to use or cause to be used any ambulance service other than the Authority (except in an expressly authorized manner). If found guilty of a Class C Misdemeanor for a violation as set out in the Ordinance, a person shall be punished by a fine not to exceed \$500 per violation.

The Restated Interlocal Agreement will be effective as of the date on which all participating jurisdictions have executed the Agreement.

**OPTIONS:**

- 1) Approve the interlocal cooperative agreement for ambulance services by the Metropolitan Area Emergency Medical Services Authority (MedStar).
- 2) Do not approve the interlocal cooperative agreement.

**RECOMMENDATION:**

Approve the interlocal cooperative agreement for ambulance services by the Metropolitan Area Emergency Medical Services Authority (MedStar).

**PRIOR ACTION/INPUT (Council, Boards, Citizens):**

City Council passed and approved the first reading of this ordinance at the June 15, 2020, City Council meeting.

**FISCAL IMPACT:**

No Fiscal Impact

**STAFF CONTACT:**

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