

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
AGENDA ITEM SUMMARY**

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<b>Meeting Date:</b> December 4, 2018	<input type="checkbox"/> Consent <input type="checkbox"/> Ordinance	<input type="checkbox"/> Regular <input checked="" type="checkbox"/> Public Hearing
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**Department:** Department of Public Safety  
**Submitted By:** Department of Public Safety  
**Submitted For:** Division of Emergency Management

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**EXECUTIVE BRIEF**

**Motion and Title:** Staff recommends motion to adopt: AN ORDINANCE OF THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, AMENDING PALM BEACH COUNTY CODE, CHAPTER 13, ARTICLE II, DIVISION 1, (ORDINANCE NO. 2017-030); AMENDING SECTION 13-22 (APPLICATION FOR COPCN); PROVIDING A SAVINGS CLAUSE; PROVIDING SEVERABILITY; PROVIDING INCLUSION IN THE CODE OF LAWS AND ORDINANCES; PROVIDING CAPTIONS; AND PROVIDING FOR AN EFFECTIVE DATE.

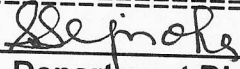

**Summary:** On November 20, 2018, the Board of County Commissioners (BCC) held a preliminary reading of the Emergency Medical Services (EMS) Ordinance revisions. The EMS Ordinance establishes standards for issuing Certificates of Public Convenience and Necessity (COPCN's) for Advanced Life Support services (ALS) which applies to the unincorporated and incorporated areas of Palm Beach County. All entities applying for a COPCN are required to have experience providing ALS services and have staff who have experience providing ALS services. This amendment permits entities applying for a Special Secondary Service Provider COPCN who have experienced staff but that lack experience providing ALS services as an entity, to obtain a Special Secondary Service Provider COPCN with conditions requiring; 1) successful provision of service for six-months (6); and 2) implementation of a formal quality assurance program meeting at least three (3) times during the six-month (6) period. All other requirements of the Ordinance apply to Special Secondary Service Provider COPCN applicants. The six-month (6) condition is documented by letter of the primary provider and the primary provider is invited to the quality assurance meetings. Special Secondary Service Provider COPCN holders are companies that contract with a Homeowner's Association to provide services within a community. They are also required to contract with the primary provider of ALS services, and adhere to the primary provider's ALS protocols and they must be licensed by the State. The Special Secondary Service Provider COPCN holder will report to the County Administrator or designee (Public Safety Director) at the end of six-months (6) with the letter from the primary provider and evidence of the formal quality assurance program. The County Administrator or designee will determine if the conditions have been met and if so, the COPCN shall remain in effect until the contract with the community expires or is terminated. If the conditions have not been satisfied, then the Special Secondary Service Provider COPCN Holder shall be in violation of the EMS Ordinance and the COPCN shall be subject to immediate suspension by the County Administrator or designee and revocation by the Board of County Commissioners (BCC). The County Administrator or designee may permit an additional 30 days to satisfy conditions if the Applicant has demonstrated good faith efforts towards satisfaction of the conditions. Special Secondary Service Provider COPCN experience does not meet the criteria to establish the necessary ALS or Basic Life Support experience for a Primary or Secondary Provider as they are not providing the full continuum of patient care since patient care is transferred to the Primary Provider, no transportation is provided, and Special Secondary Service Provider's do not provide patient care during transport. This proposed amendment to the EMS Ordinance was presented to the League of Cities on October 24, 2018, and was unanimously approved. The EMS Council has reviewed and recommends the BCC approval of the Ordinance revisions at the November 14, 2018 EMS Council meeting. Countywide (LDC)

**Background and Policy Issues (continued on Page 3):**

**Attachment:**

1. Proposed Emergency Medical Services Ordinance Amendment
2. Final Emergency Medical Services Ordinance Amendment
3. Proof of Publication

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<b>Recommended By:</b> <u></u> <div style="text-align: center;">Department Director</div>	<u>11/21/18</u> <div style="text-align: center;">Date</div>
<b>Approved By:</b> <u></u> <div style="text-align: center;">Assistant County Administrator</div>	<u>11/24/18</u> <div style="text-align: center;">Date</div>



## II. FISCAL IMPACT ANALYSIS

### A. Five Year Summary of Fiscal Impact

Fiscal Years	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
Net Fiscal Impact	<u>0</u>	_____	_____	_____	_____

# ADDITIONAL FTE

POSITIONS (Cumulative) \_\_\_\_\_

Is Item Included in Current Budget? Yes \_\_\_\_\_ No \_\_\_\_\_  
Does this item include the use of federal funds? Yes \_\_\_\_\_ No X

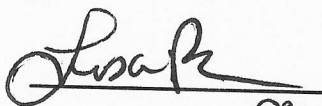
There is no fiscal impact associated with this agenda item.

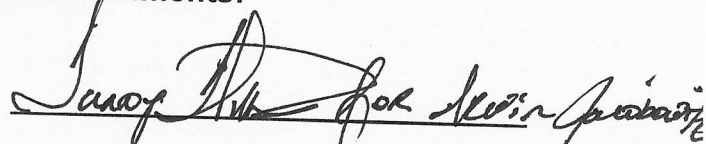
### B. Recommended Sources of Funds/Summary of Fiscal Impact:

Departmental Fiscal Review:  10/25/18

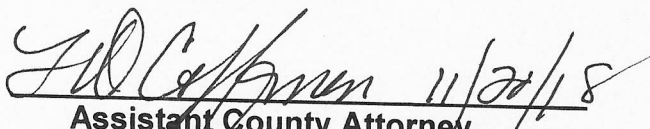
## II. REVIEW COMMENTS

### A. OFMB Fiscal and/or Contract Dev. and Control Comments:

 11/7/18  
OFMB <sup>03</sup> 11/7

 11-19-18 (Tu)  
Contract Administration

### B. Legal Sufficiency:

 11/20/18  
Assistant County Attorney

### C. Other Department Review:

\_\_\_\_\_  
Department Director

This summary is not to be used as a basis for payment.

## II. FISCAL IMPACT ANALYSIS

### A. Five Year Summary of Fiscal Impact

Fiscal Years	<u>2019</u>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>
Capital Expenditures					
Operating Costs					
External Revenues					
Program Income (County)					
In-Kind Match (County)					
Net Fiscal Impact	0				
# ADDITIONAL FTE POSITIONS (Cumulative)					

Is Item Included in Current Budget? Yes        No         
Does this item include the use of federal funds? Yes        No   X  

There is no fiscal impact associated with this agenda item.

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**

**Departmental Fiscal Review:** \_\_\_\_\_

## II. REVIEW COMMENTS

**A. OFMB Fiscal and/or Contract Dev. and Control Comments:**

OFMB Contract Administration

**B. Legal Sufficiency:**

**Assistant County Attorney**

**C. Other Department Review:**

Department Director

**This summary is not to be used as a basis for payment.**

## **Background and Policy Issues (continued from Page 1):**

**Background and Policy Issues:** The EMS Ordinance is established pursuant to Chapter 401, Florida Statutes which grants counties the ability to grant COPCN's to EMS providers within the County. Special Secondary Service Provider COPCN are issued to companies who have contracted to provide services in a gated community. Since they are on-site continuously, they provide immediate ALS services in an emergency pending arrival of the Primary ALS Service Provider who will transport the patient. Special Secondary Service Provider COPCN must comply with protocols of the Primary Provider, obtain a State license and comply with all rules and regulations applicable to COPCN holders.



**AN ORDINANCE OF THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, AMENDING PALM BEACH COUNTY CODE, CHAPTER 13, ARTICLE II, DIVISION 1, (ORDINANCE NO. 2017-030); AMENDING SECTION 13-22 (APPLICATION FOR COPCN); PROVIDING A SAVINGS CLAUSE; PROVIDING SEVERABILITY; PROVIDING INCLUSION IN THE CODE OF LAWS AND ORDINANCES; PROVIDING CAPTIONS; AND PROVIDING FOR AN EFFECTIVE DATE.**

**WHEREAS**, Chapter 13, Article II, Division 1, Section 13-22(a) of the Palm Beach County Code sets forth provisions relating to the requirement of obtaining a Certificate of Public Convenience and Necessity (COPCN) to provide Primary or Secondary provider services; and

**WHEREAS**, the EMS Ordinance requires that all entities have operating experience in providing Advanced life support (ALS) services, and that such entities also have staff experienced in providing ALS services as a condition of obtaining a Primary, Secondary or Special secondary services COPCN,

**WHEREAS**, the provision of Special secondary services is limited to services within a gated community as a first responder service until the Primary COPCN holder arrives on scene; and

**WHEREAS**, the services offered by Special secondary service providers are beneficial to the public health, safety and welfare of Palm Beach County residents; and

**WHEREAS**, there are numerous gated communities in Palm Beach County and a need for Special secondary service providers to provide those services in order to promote public health, safety and welfare and the best interests of the public; and

**WHEREAS**, Special secondary services are only provided after the provider executes a memorandum of understanding with the Primary COPCN holder and with a Community Association; and

**WHEREAS**, in view of the requirement that staff employed by a provider must have experience in providing ALS services, and considering the public benefits from having available Special secondary service providers, a COPCN will be issued to Special secondary services providers lacking the requisite entity experience, with conditions that require a review after six

months that will determine whether the entity has demonstrated the ability to meet the public safety goals and operating requirements of the EMS Ordinance.

**NOW, THEREFORE, BE IT ORDAINED BY THE BOARD OF COUNTY COMMISSIONERS OF PALM BEACH COUNTY, FLORIDA, that:**

**Chapter 13, Article II, Division 1, Section 13-22 of the Palm Beach County Code is hereby amended as follows:**

**Section 1. Purpose and Intent**

The recitals set forth above are true and correct, and form the purpose and intent of this ordinance.

**Section 2. Section 13-22 Application for COPCN.**

Sec. 13.22 – Application for COPCN.

- (a) Applications for Primary or Secondary Provider COPCN.
- (5) The application shall include each of the requirements listed below:
- a. The financial information of the applicant to ensure financial ability to provide and continue to provide service to the Area. Such financial information shall include copies of the applicant's past two (2) Medicare audits, if any. Privately held entities must provide copies of the past three (3) years of audited financial statements of the company and its parent company or holding company, if any. Government entities must provide the past three (3) years Comprehensive Annual Financial Reports via hard copy, or electronically. For purposes of this Division a parent company or holding company shall mean any person, corporation or company holding, owning or in control of more than ten (10) percent stock or financial interest of another person, corporation or company.
  - b. The proposed rate structure.
  - c. Except for current COPCN Holders, a summary history of applicant's Emergency Services performance record, which provides proof that at the time of application, the applicant has demonstrated experience providing ALS or BLS Services. Experience providing ALS or BLS services must include experience providing the full continuum of patient care from call initiation, during patient transport and through to final patient transfer to hospital or other final destination. Special Secondary Service Provider COPCN experience does not meet the criteria to establish the necessary ALS or BLS experience since patient care is transferred to the Primary Provider, no transportation is provided, and Special Secondary Service Provider's do not provide patient care during transport.
    - i. Applicants for Special Secondary Service Provider COPCNs who meet the staff experience requirement set forth herein, but that do not have a summary history of performance providing ALS Services, are eligible for a one-time COPCN with conditions.
    - ii. The COPCN shall be issued and after six months, the COPCN Holder shall deliver a report to the Department with a summary history of the COPCN Holder's performance record demonstrating that Applicant successfully provided ALS Services during the initial six months of operation and accompanied by a letter from the Primary Provider attesting that the COPCN Holder has performed satisfactorily to the knowledge of the Primary Provider. Additionally, the COPCN Holder shall provide records substantiating the implementation of a formal quality assurance system and that at least three (3)



formal, quality assurance meetings having taken place during the initial six (6) months of operation. The Primary Provider is required to be invited to participate in the quality assurance meetings.

iii. Upon review of the required documentation, the Administrator will determine if the conditions have been satisfied. Special Secondary Service Providers who satisfy the conditions shall be issued a letter acknowledging satisfaction and removal of the conditions of the COPCN. In that event the COPCN shall remain in effect until the contract with the Community Association expires or terminates.

iv. If the Administrator determines the conditions have not been satisfied, then the COPCN Holder shall be in violation of the EMS Ordinance and the COPCN shall be subject to immediate suspension by the Administrator and revocation by the BCC. The Administrator may permit an additional thirty (30) days to satisfy conditions if the Applicant has demonstrated good faith efforts towards satisfaction of the conditions.

v. Except as expressly modified herein, COPCN Holders with conditions are subject to the requirements of the EMS Ordinance and all Rules and Regulations of the BCC and nothing herein shall be construed as a limitation, waiver or relinquishment of any right, remedy, or enforcement power authorized by law, or the EMS Ordinance, or the Rules and Regulations.

- d. The Applicant must have at least one (1) supervisory or higher, level employee who possesses a minimum of three (3) years of experience in pre-hospital ALS Services.

### **Section 3. Repeal of laws in conflict.**

All local laws and ordinances applying to the unincorporated area of the county in conflict with any provision of this article are hereby repealed to the extent of any conflict.

### **Section 4. Savings clause.**

Notwithstanding the section of this ordinance regarding repeal of laws in conflict, all administrative and court orders, fines, and pending enforcement issued pursuant to this authority and procedures established by Chapter 13, Article II, Division 1, of the Palm Beach County Code shall remain in full force and effect.

### **Section 5. Severability.**

If any section, paragraph, sentence, clause, phrase, or word of this Ordinance is for any reason held by a Court of competent jurisdiction to be unconstitutional, inoperative, or void, such holding shall not affect the remainder of this Ordinance.

### **Section 6. Inclusion in the Code of Laws and Ordinances.**

The provisions of this Ordinance shall become and be made a part of the Palm Beach County Code. The sections of this Ordinance may be renumbered or re-lettered to accomplish such, and the word Ordinance may be changed to section, article, or other appropriate word.

### **Section 7. Captions.**

The captions, section headings, and section designations used in this Ordinance are for convenience only and have no effect on the interpretation of the provisions of this Ordinance.

**Section 8. Effective Date.**

The provisions of this Ordinance shall become effective upon filing with the Department of State.

**APPROVED and ADOPTED by the Board of County Commissioners of Palm Beach County, Florida, on this the \_\_\_\_\_ day of \_\_\_\_\_, 2018.**

**ATTEST:**

**SHARON R. BOCK,  
CLERK & COMPTROLLER**

**PALM BEACH FLORIDA BY ITS  
BOARD OF COUNTY COMMISSIONERS**

By: \_\_\_\_\_  
Deputy Clerk

By: \_\_\_\_\_  
Mayor

**APPROVED AS TO FORM AND  
LEGAL SUFFICIENCY**

By: \_\_\_\_\_  
County Attorney

Attachment # 1

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