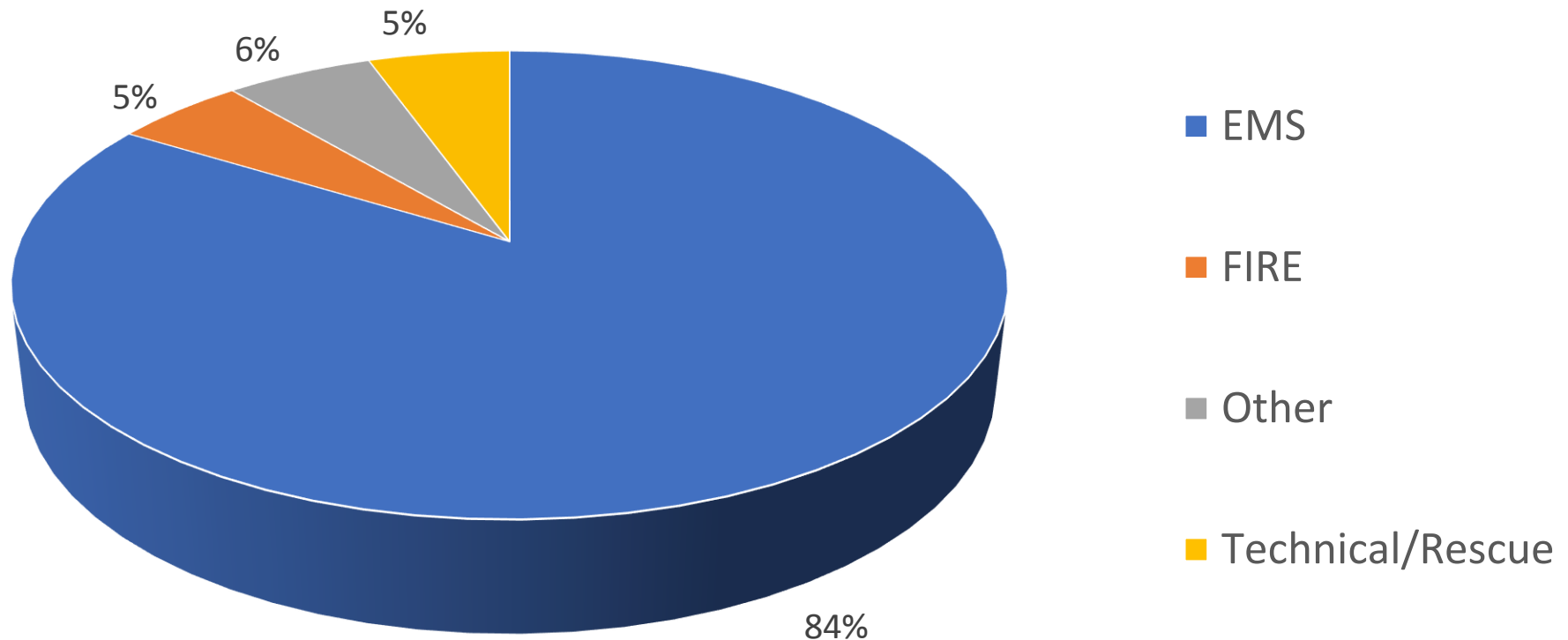
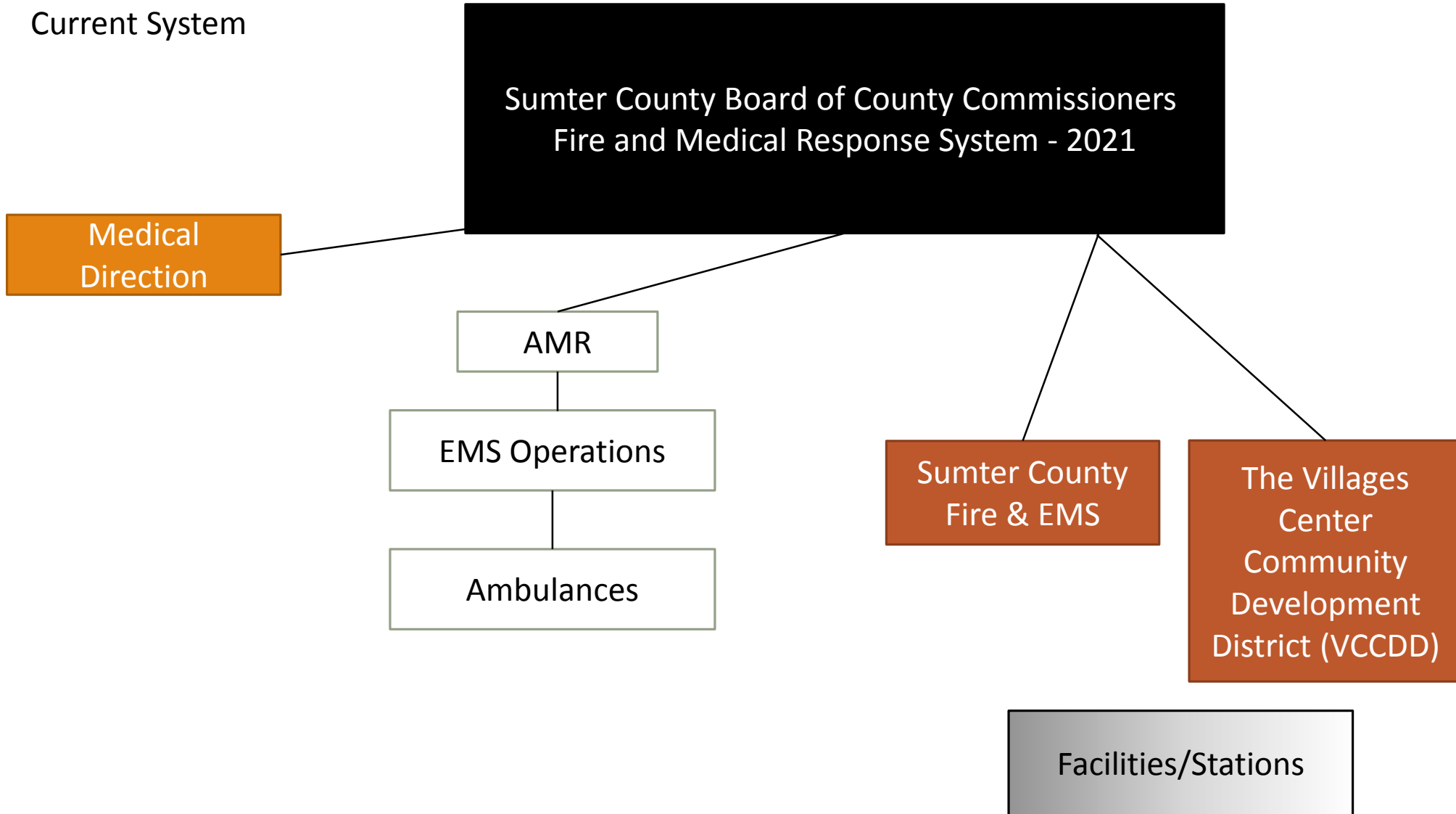


911 Calls Transferred to Fire/EMS Dispatch by Service Type - 2020



Current System



Sumter County Board of County Commissioners Statutory Authority

- Florida Statutes Chapter 125 grants the County the power to provide ambulance service
- Florida Statutes Chapter 171 provides for Interlocal Service Boundary Agreements that Sumter County and its five municipalities consolidate fire services with Sumter County as the sole provider
- Florida Statutes Chapter 401 grants the County the power to issue Certificates of Public Convenience and Necessity (COPCN) for transport and non-transport medical response agencies

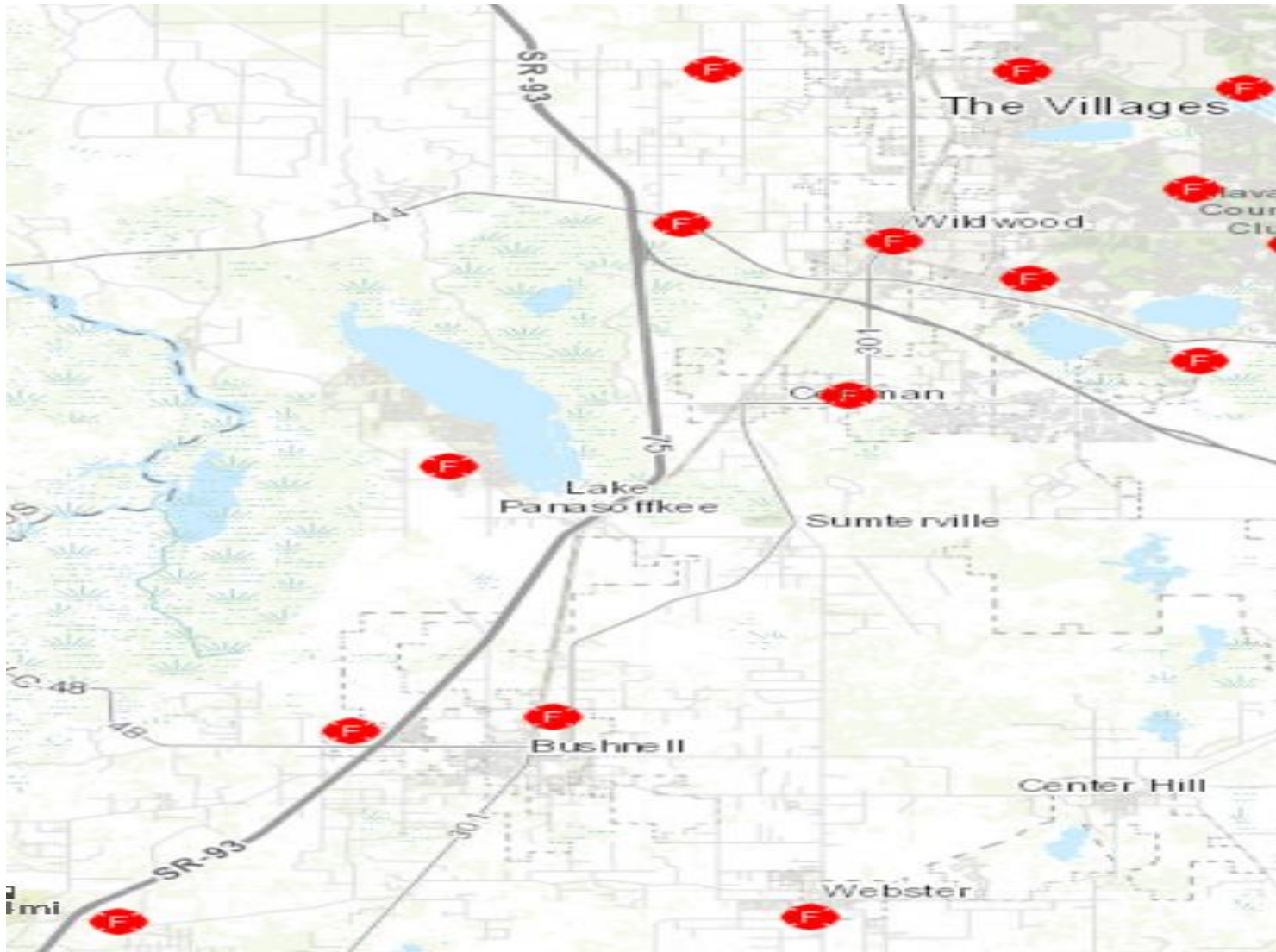
Sumter County Fire & EMS Operations

Sumter County Fire & EMS Department

- A Department of the Sumter County Board of County Commissioners
- Funded by the County's General Fund
 - Consisting of Property and other taxes
 - The Municipal Service Benefit Unit (MSBU) fee of \$124 per improved parcel per year
- Fleet maintenance provided by Sumter County

The Villages Center Community Development District (VCCDD)

- Authorized by the Sumter County Board of County Commissioner to provide Fire & EMS Services in Sumter County
- Funded by the County's General Fund
 - Consisting of Property and other taxes
 - The Municipal Service Benefit Unit (MSBU) fee of \$124 per improved parcel per year
- Fleet Maintenance provided by Sumter County



15 Fire Stations in Sumter County

- 10 owned by Sumter County
- 1 owned by The Villages® developer
- 4 owned by District governments
- Sumter County Fire & EMS operates out of 8 of the 15
- VCCDD operates out of 7 of the 15

Fire Agency Overview

Fiscal Year 2020-2021

The Funding in the Sumter County FY 20/21 Adopted Budget reflects the VCCDD's determined percentage of Sumter County support for services provided in Sumter County:

Agency	Stations	Operations Personnel	Administrative Personnel	Total Personnel	Budget
SCFEMS	8	96	5	101	\$ 10,944,246.00
VCCDD	9**	138*	17	155	\$ 17,480,648.00
Total	17	234	22	256	\$ 28,424,894.00

*VCCDD Operational Personnel for FY 20-21 does not reflect the additional 27 firefighter positions awarded through a three-year SAFER grant. **1 station is located in Marion County and 1 in Lake County

Sumter County Ambulance Services

American Medical Response

- Contracted by the Sumter County Board of County Commissioners
- Funded by the County's General Fund for dispatch, available emergency transport units, medical logistics support, and transportation of Baker Act individuals
 - Adopted FY 20/21 Budget \$1,277,518
- Funded by rate payers for transport (non-emergency and emergency)
- Fleet maintenance provided by AMR
- Contract expires 9/30/2022 (RFQ for services will need to proceed no later than 1/1/2022)

Components of an EMS Ambulance Operation

- Dispatch
- Operations
- Billing
- Interfacility
- Logistics
- QM/QA/Training
- Fleet
- Facilities/Stations
- Personnel
- HR

Sumter County Medical Direction

UF Medical Director Team

- Contracted with UF College of Medicine
- Funded by the County's General Fund
- Provides medical direction for the medical response system in Sumter County
- Provides quality assurance of all medical responses in Sumter County
- Provides credentialing of all emergency medical technicians and paramedics operating in Sumter County's medical response system

Countywide Response Information

Countywide response reflects first closest unit response for all fire and emergency medical services.

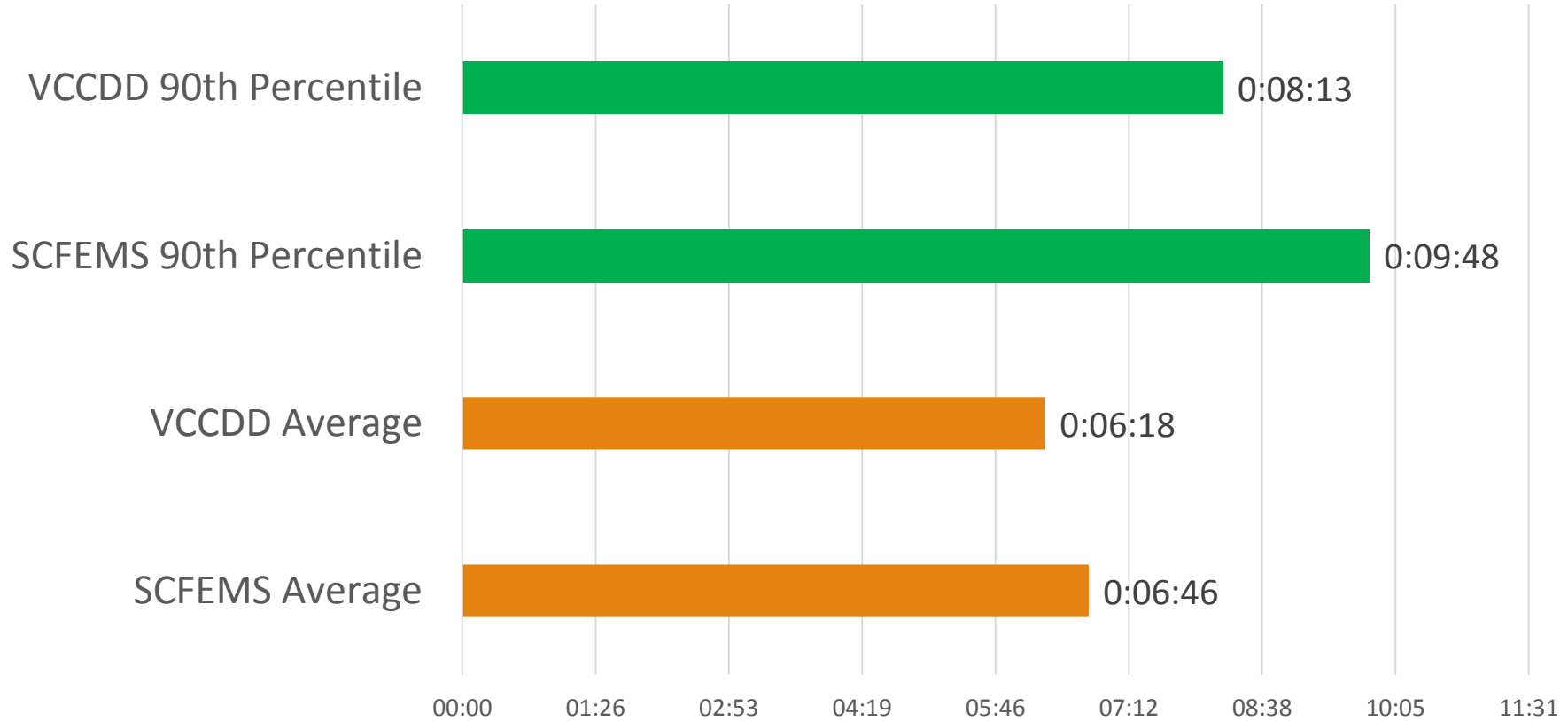
Countywide	Count	Chute	Response	Total Response	Total Busy
Average	30,971	0:00:37	0:06:32	0:07:07	0:35:43
90th Percentile	30,971	0:01:03	0:10:25	0:10:53	1:20:59

Average Fire Response By Density	Chute	Response	Total Response	Total Busy
Rural	0:00:55	0:07:03	0:09:15	0:19:25
Suburban	0:00:51	0:03:52	0:06:22	0:14:56

90th Percentile Fire Response By Density	Chute	Response	Total Response	Total Busy
Rural	0:01:12	0:11:44	0:12:50	0:36:53
Suburban	0:01:07	0:07:17	0:08:21	0:31:27

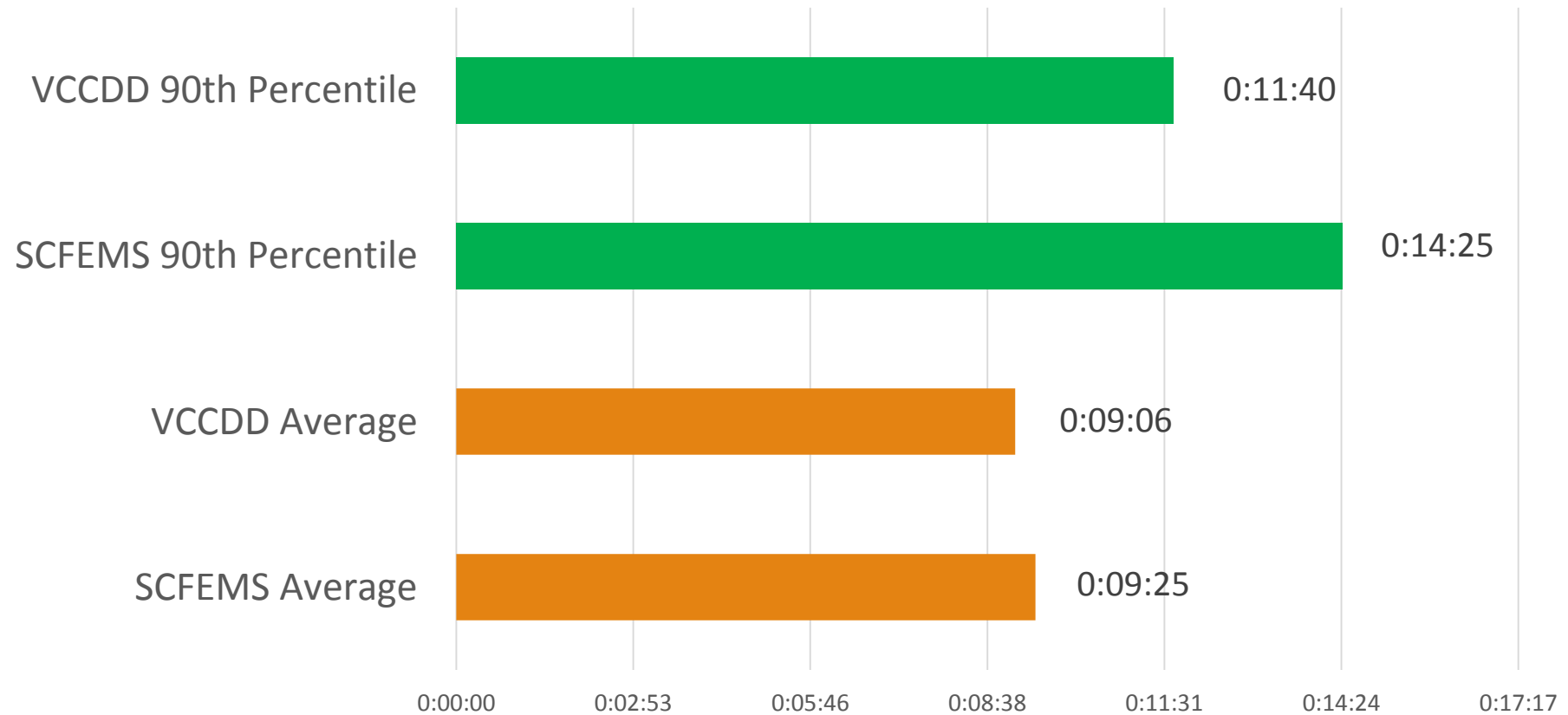
Fire Department Response Information 2020

Suburban Total Response



Fire Department Response Information 2020

Rural Total Response

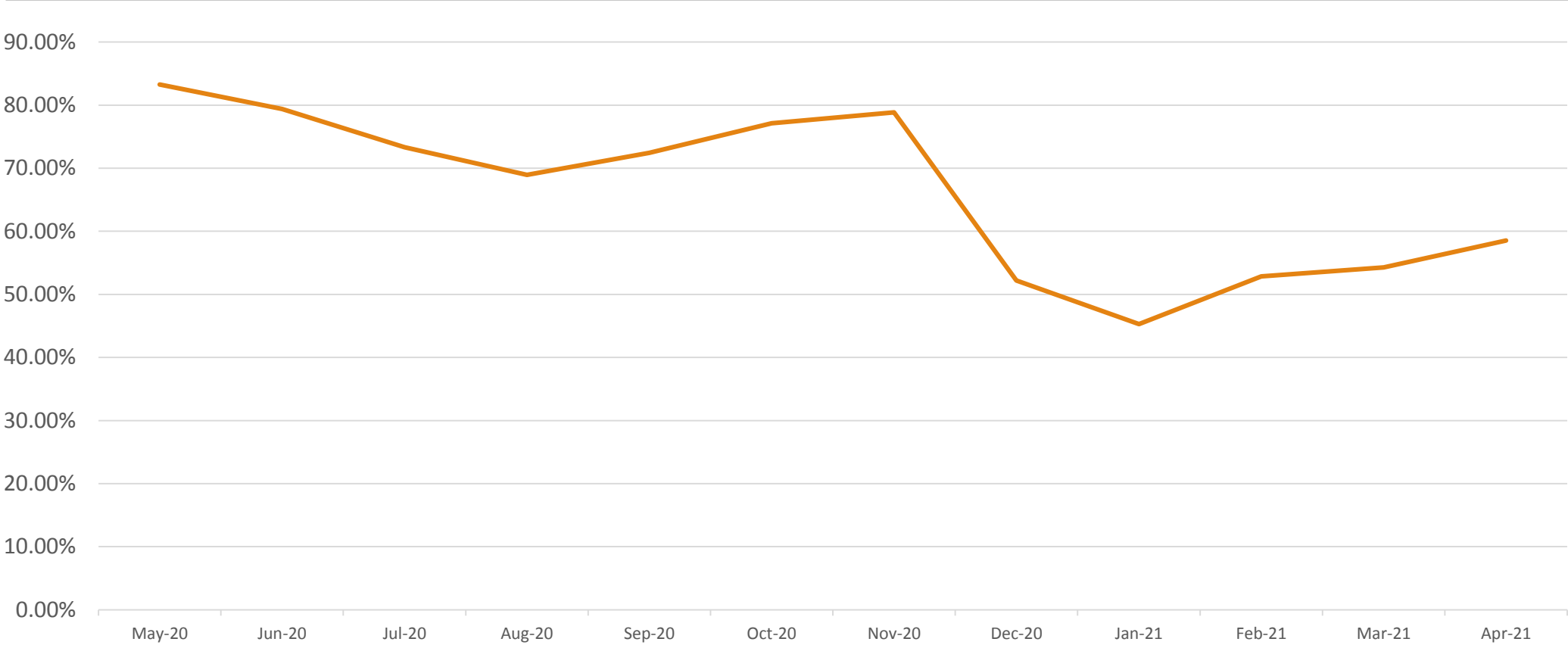


Fire Department & EMS Response Data 2020

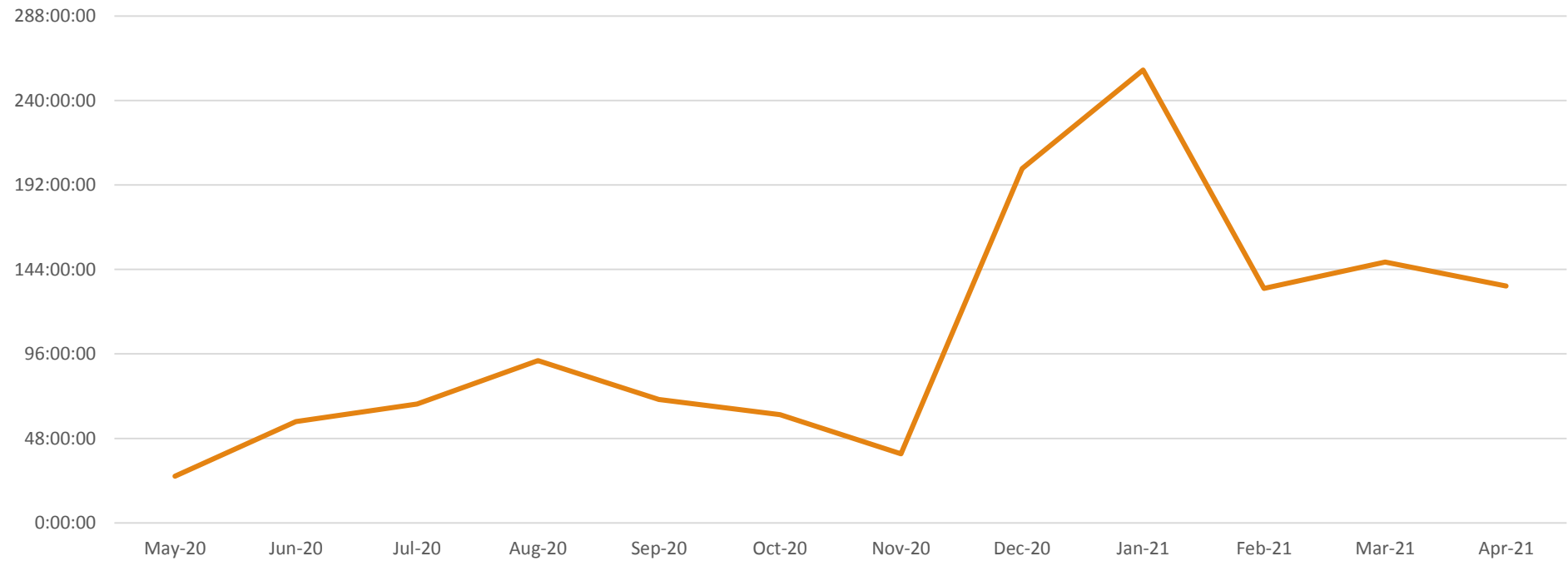
EMS Incident Agency Average	Count	Chute	Response	Total Response	Total Busy
AMBULANCE	24525	0:00:44	0:10:05	0:10:39	0:55:40
SCFEMS	9205	0:00:59	0:08:06	0:08:24	0:18:13
VCCDD	22519	0:00:49	0:06:07	0:06:19	0:15:00

EMS Incident Agency 90th Percentile	Count	Chute	Response	Total Response	Total Busy
AMBULANCE	24525	0:00:51	0:15:55	0:16:28	1:42:53
SCFEMS	9205	0:01:14	0:11:43	0:12:02	0:35:43
VCCDD	22519	0:01:07	0:08:16	0:08:29	0:31:45

Percentage of Hospital Offloads Within 30 Minutes Arrival by Month



Offload Hourly Hold by Month



EMS System Design Discussion

Desmond Fitzpatrick M.D.

Introduction for improving the medical response system

When evaluating alternative response systems that are high quality, reliable, and efficient, an area must explore multiple alternatives to the traditional Engine and Ambulance only response.

These can include:

- Adding Quick Response Vehicles(QRVs), which allow for easier positioning and maneuverability than traditional engines
- Adaptive levels of response for based on call triage including sending a non-transport units and BLS level transport
- Having phased uses for other resources including telehealth and nurse navigator lines

Hospital delays for offloading from ambulances is not within Sumter County's control except to consider financial penalties against hospitals for greater than a 30 minute offload time.

2008 NAEMSP and ACEP

EMS systems may encounter patients who do not need advanced life support (ALS) level care or evaluation at an emergency department. In these circumstances, transportation by alternate means or to an alternate destination may be appropriate.

Originally approved by ACEP in 2001

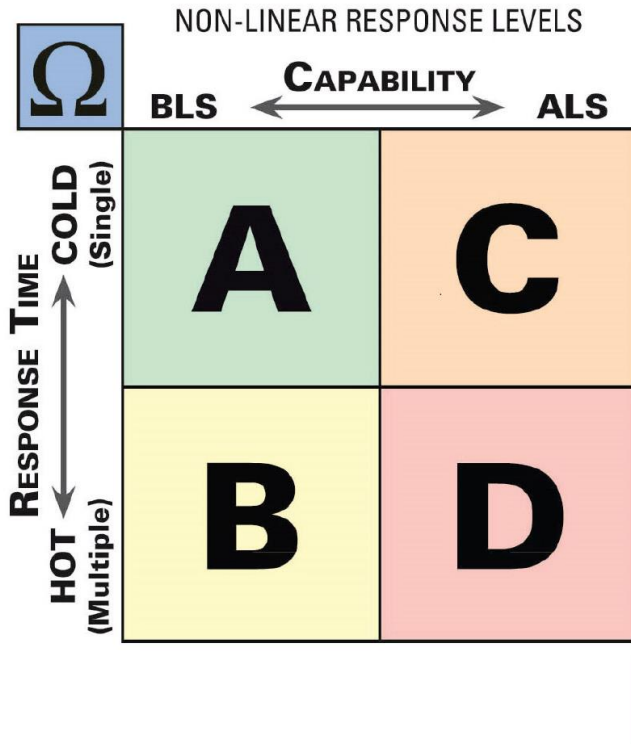
doi:10.1016/j.annemergmed.2008.08.016

2013 DOT & HHS White paper

Estimated 15% of Medicare population ED transports could be better served in a different way.

By treating in place (25%), transport to physician office (50%) and transport to urgent care (25%) they estimated \$597,020,944 in annual cost savings

Expect that savings may be higher when expanded to all populations



ECHO (E) definition:

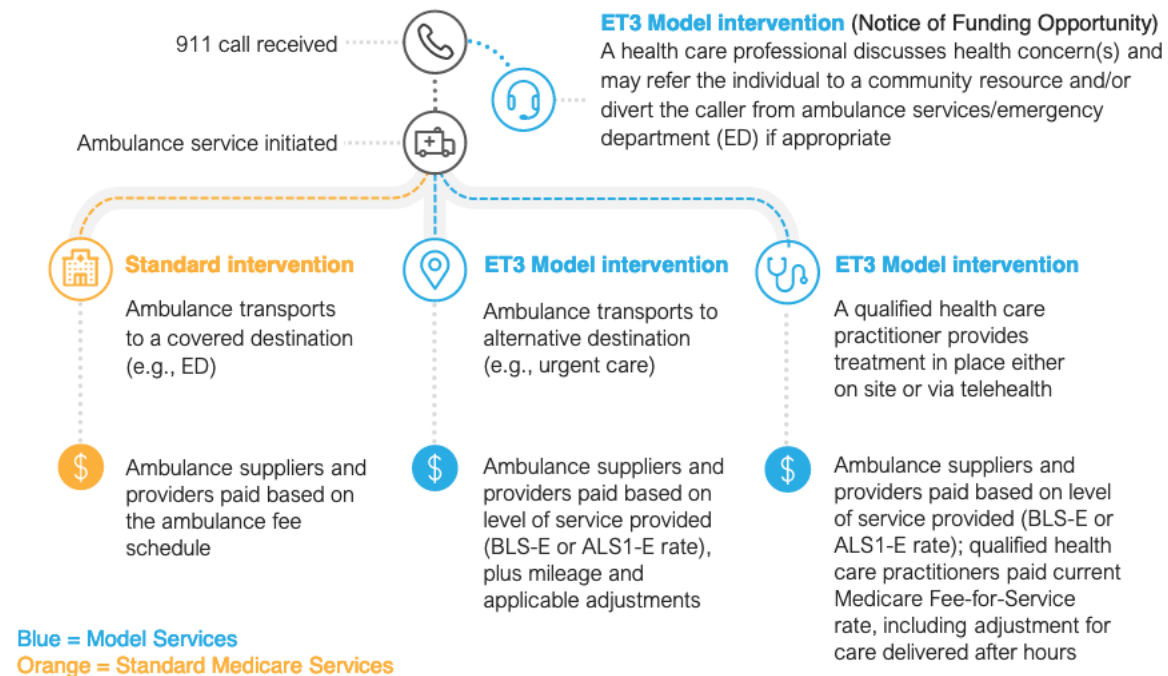
Conditions requiring **very early recognition** and **immediate dispatch** of the absolute closest response of **any trained crew** such as police with AEDs, fire ladder or snorkel crews, HazMat units, or other specialty teams not in the standard medical response matrix.

OMEGA (Ω) definition:

Approved low acuity conditions qualifying for **non-EMS response referrals** to quality-assured nurse assessment systems, and other external specialty agencies such as Poison Control Centers, Rape Crisis Lines, Suicide and Mental Help Lines, social services, and clinics.

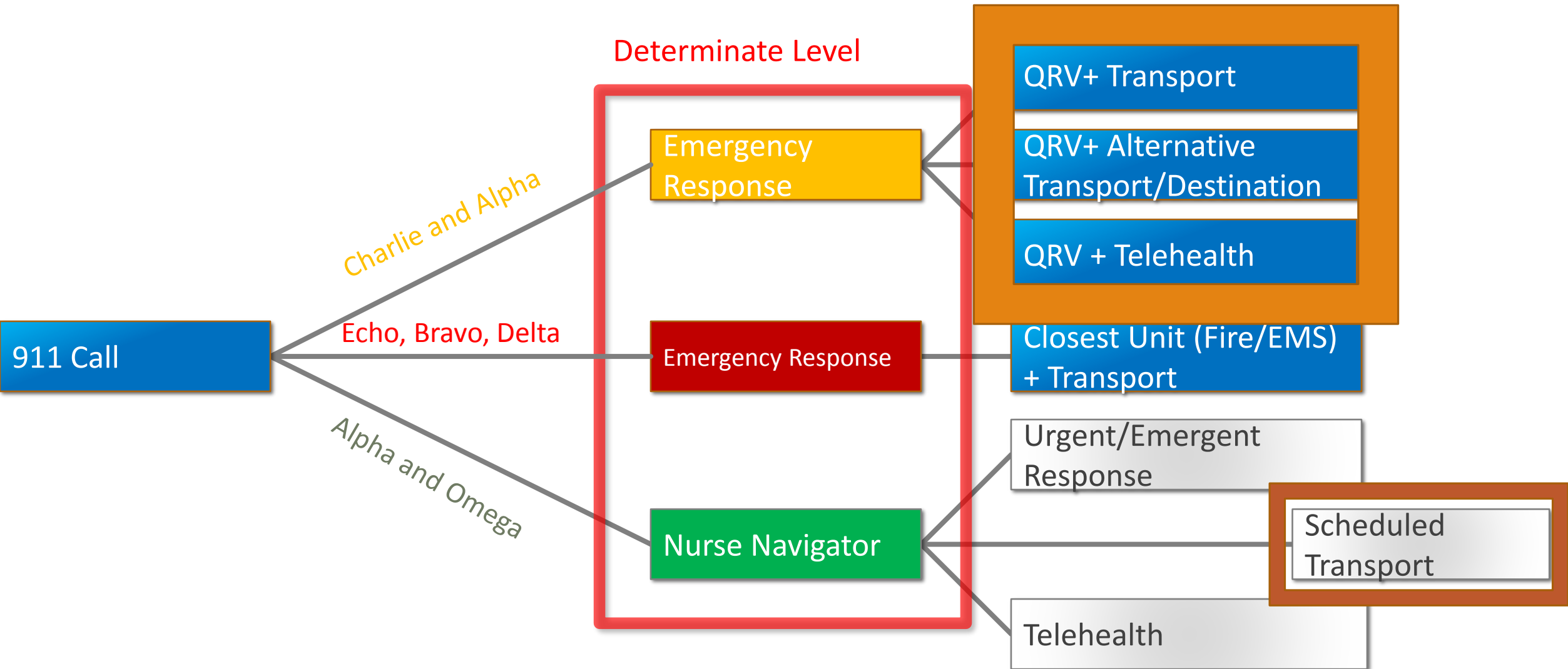
Dispatch Determinate Overview

Emergency Triage Treat and Transport

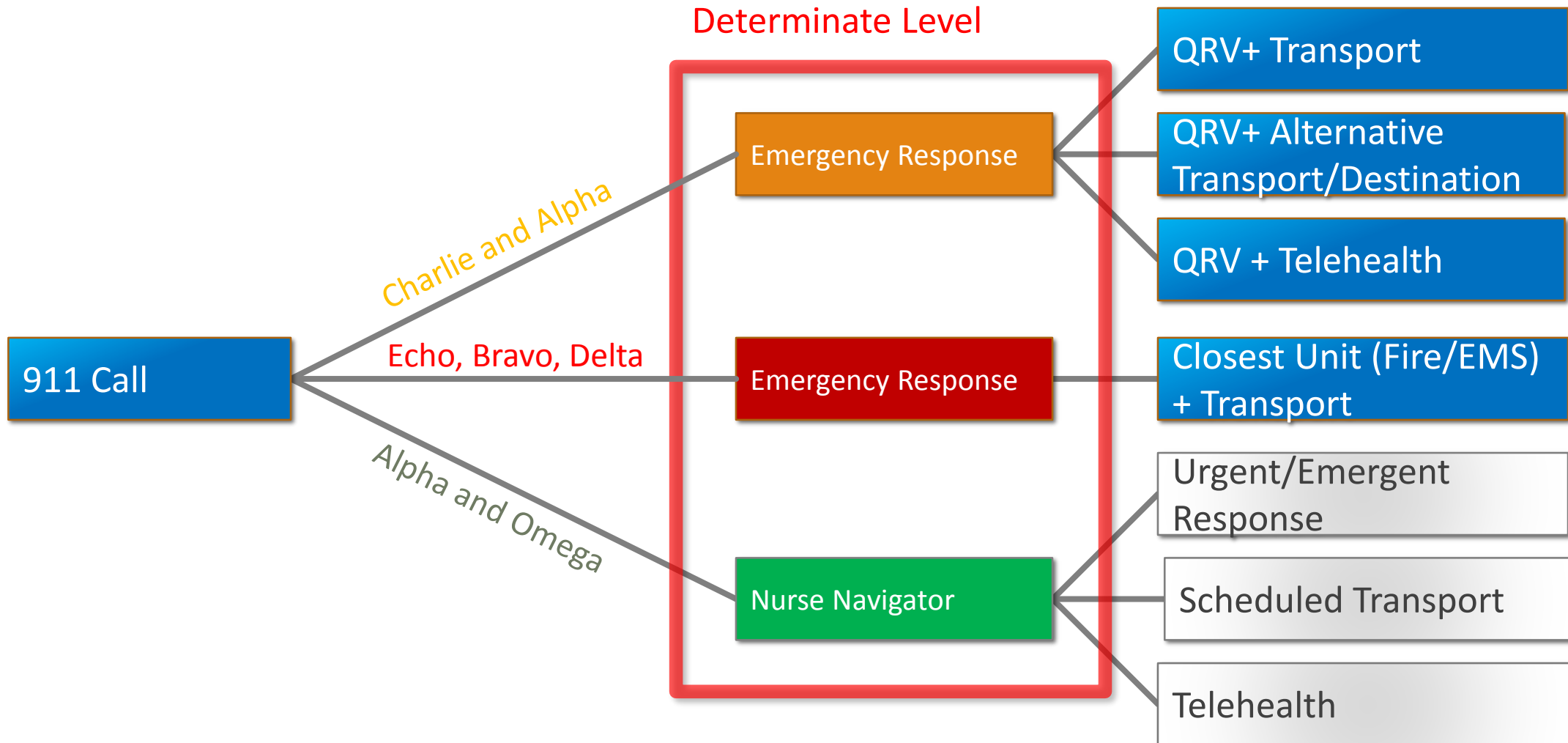


ET3 Model Interventions must be available 24/7

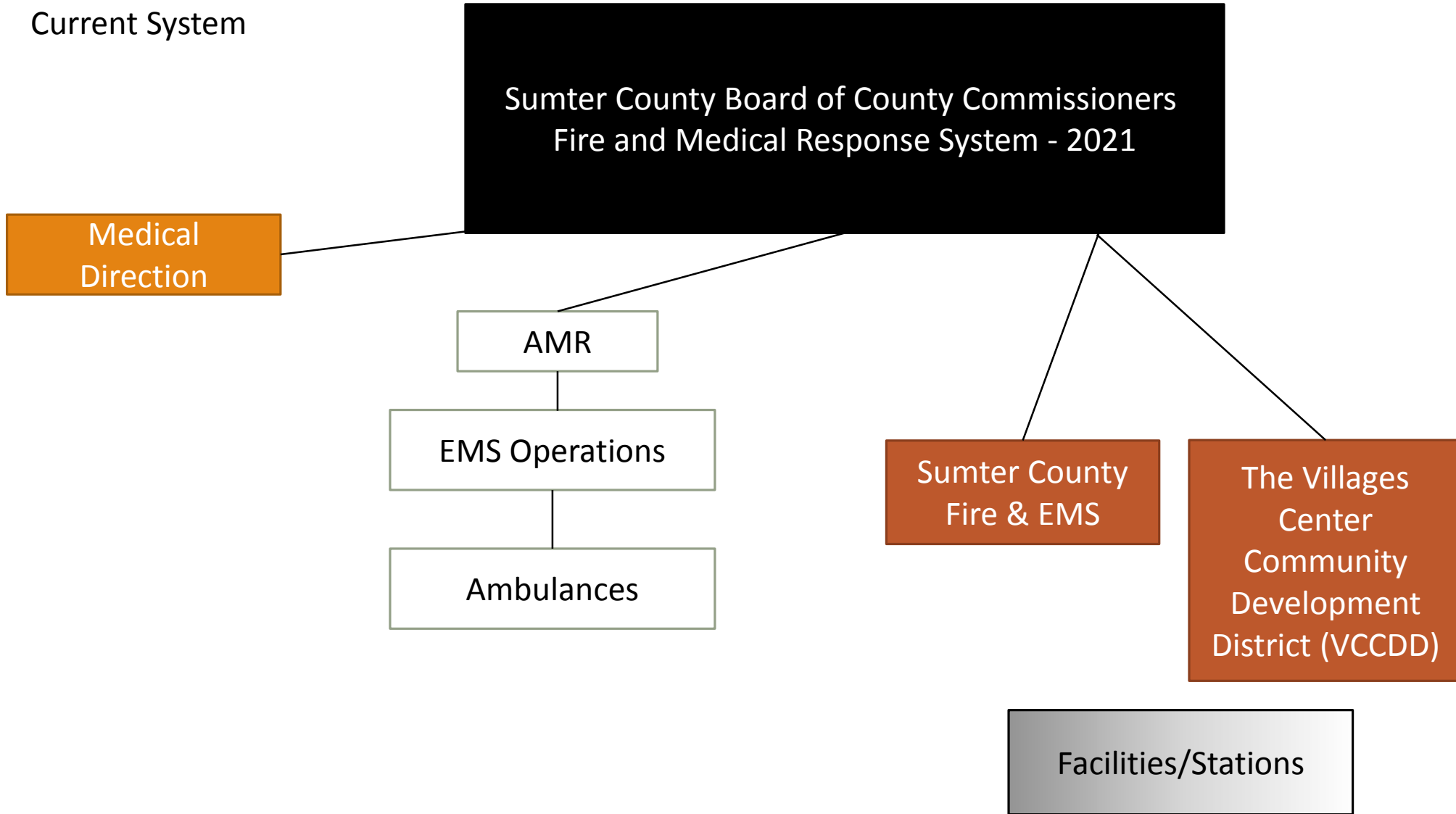
Current Improvement to the Medical Response System



Addition of QRVs and Scheduled Transport for the Next Improvement to the Medical Response System

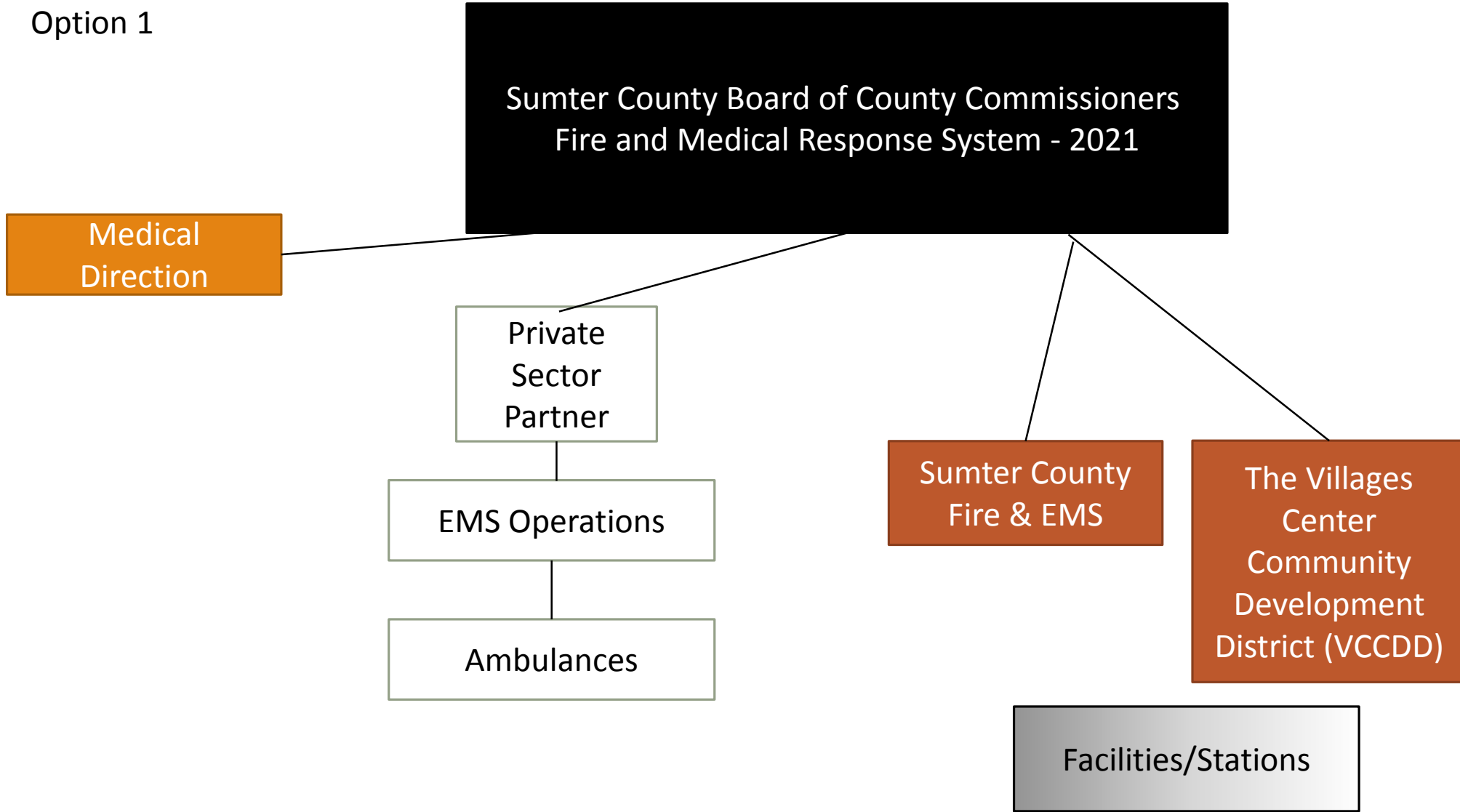


Current System



Option 1

Without QRVs



Option 2

Without QRVs

Sumter County Board of County Commissioners
Fire and Medical Response System - 2021

Medical
Direction

Private
Sector
Partner

EMS Operations

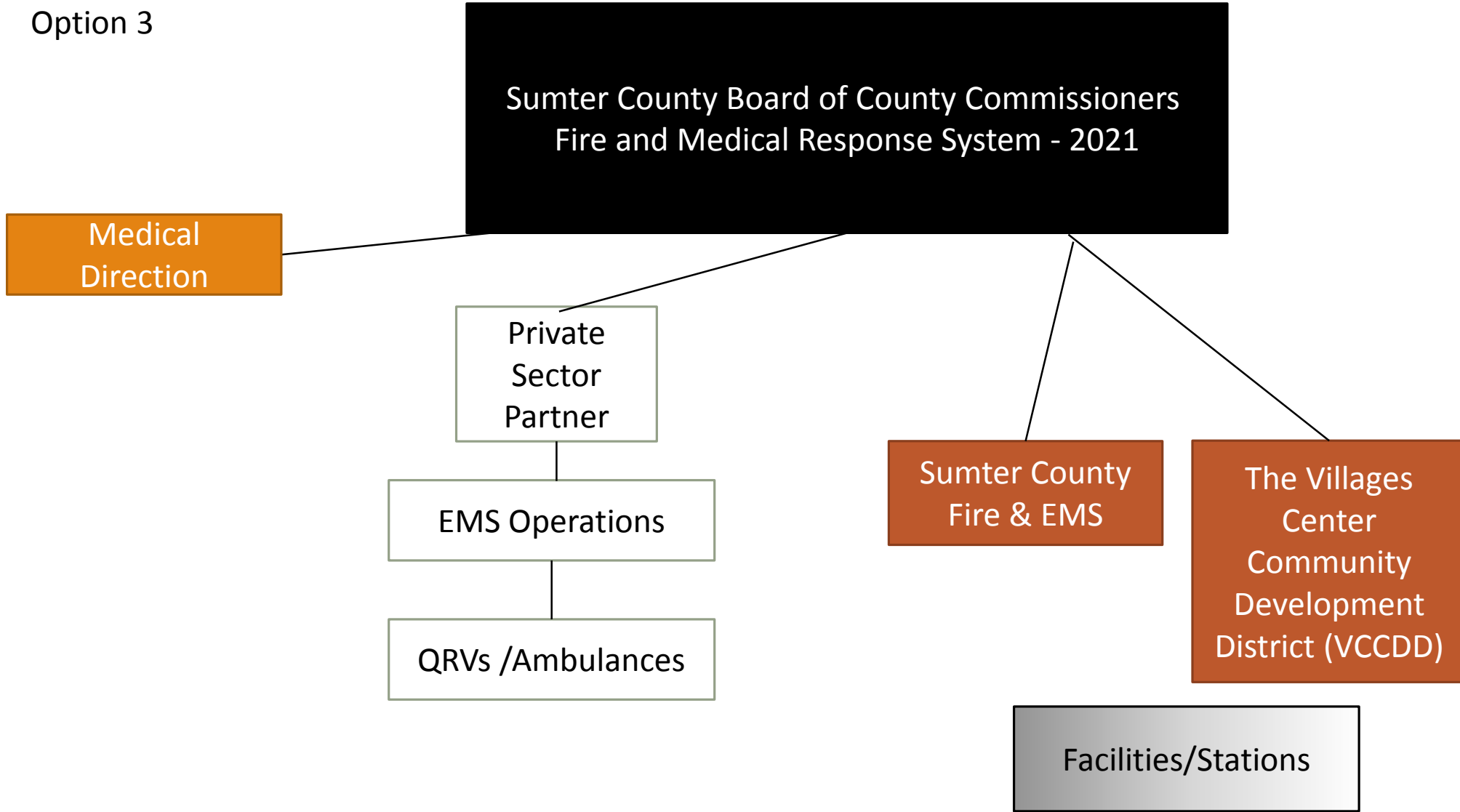
Ambulances

Sumter County
Fire & EMS

Facilities/Stations

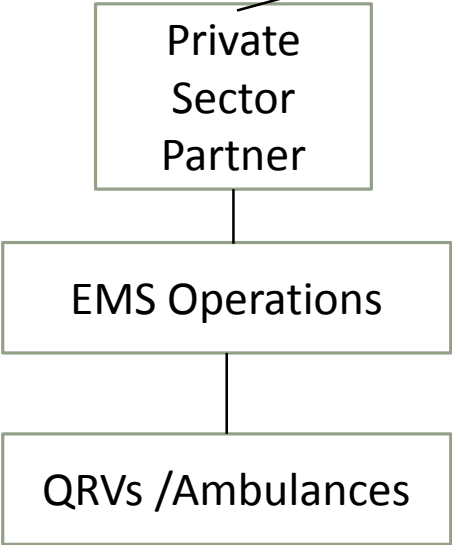
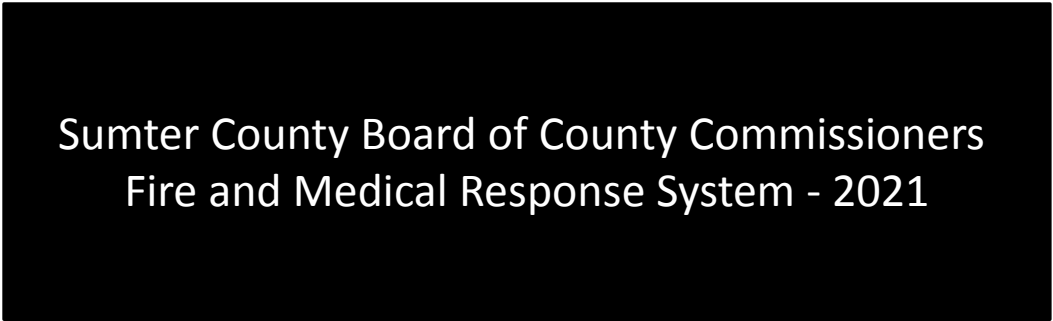
Option 3

With QRVs



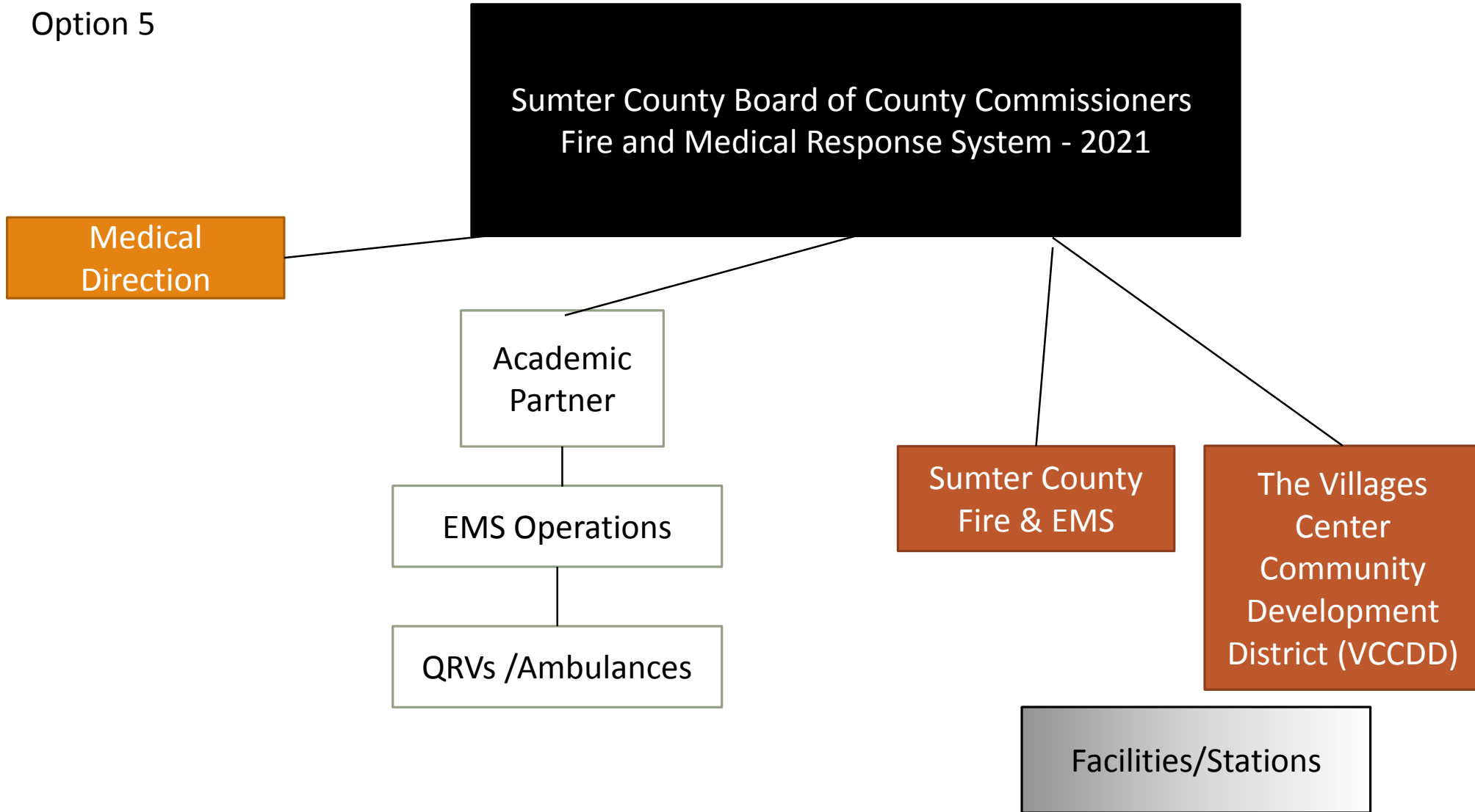
Option 4

With QRVs



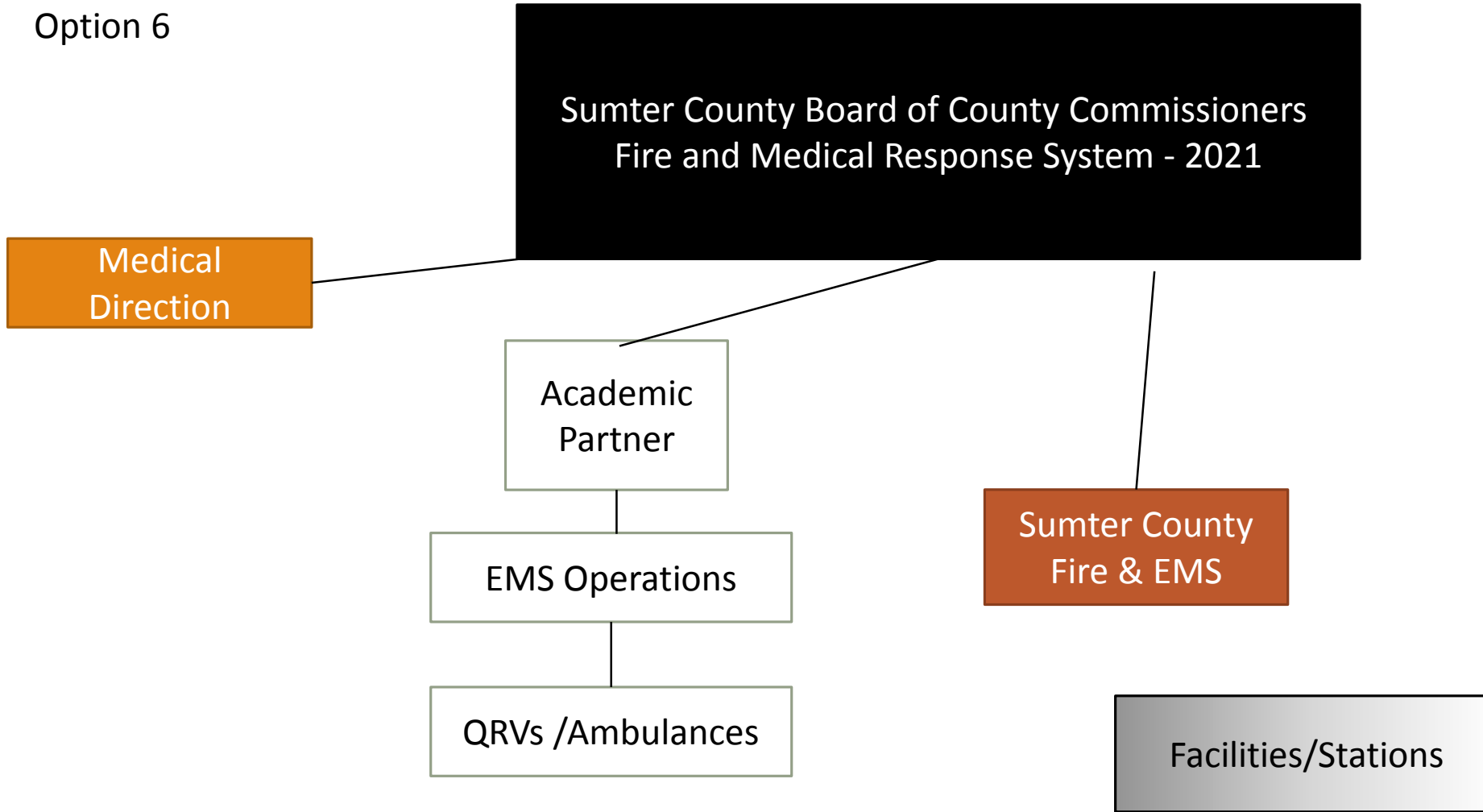
Option 5

With QRVs



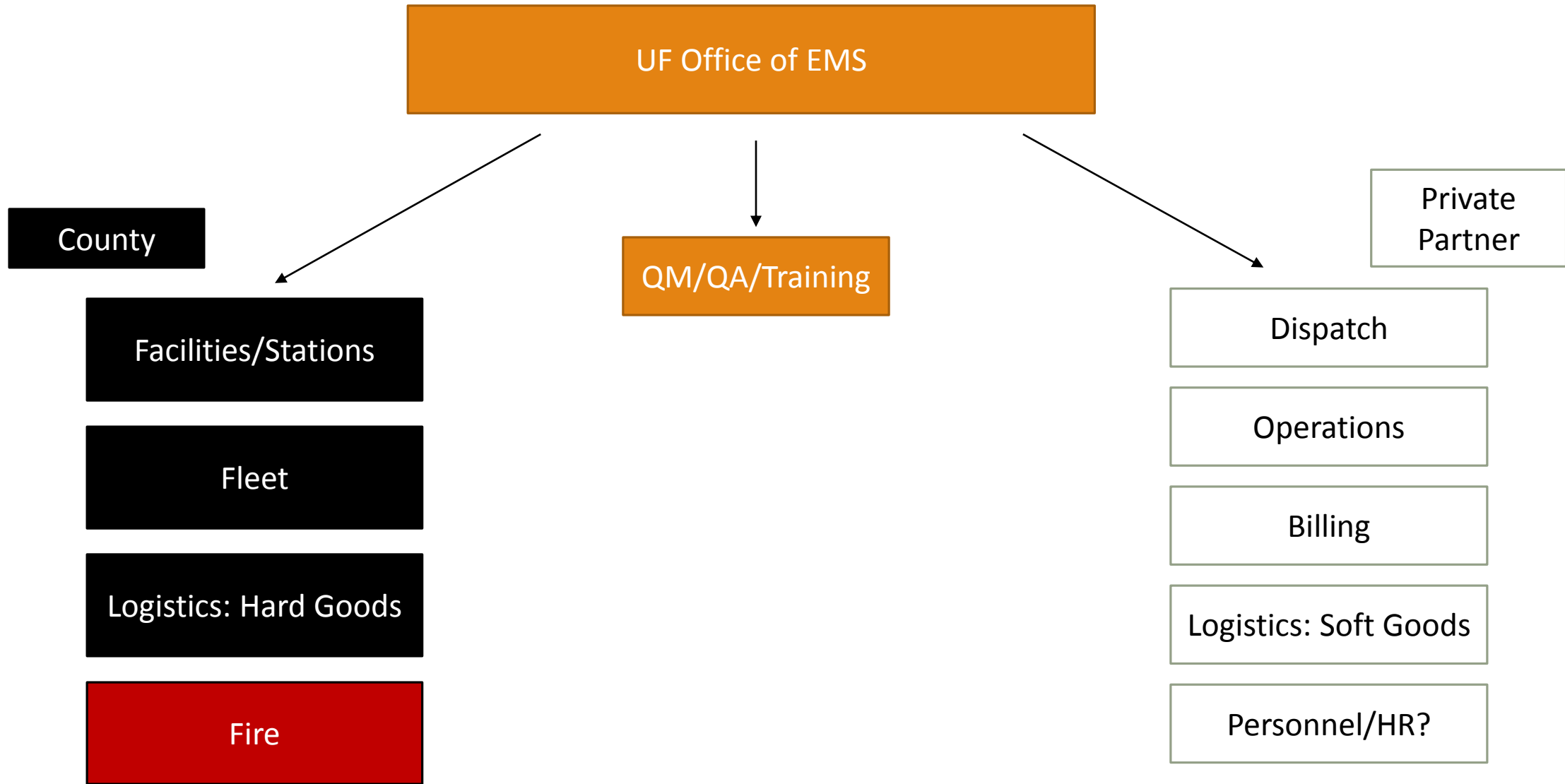
Option 6

With QRVs





A Public, Private, Academic Partnership



Proposed Fire Responsibilities

CONTINUED

- All Current Fire Responsibilities and NFPA Standards
- High Priority Call if closest [Echo (cardiac arrests), Delta (Respiratory Distress) Bravo (hemorrhage) etc.]
- MVC response with extrication and VM, special ops, HAZMAT
- Lift Assists

REMOVED

- Medium Lower priority calls (e.g. alphas and charlie) which is about 65% of current call volume
- Delayed and longer scene times on above calls freeing response for high priority issues across the county (fires and cardiac arrests etc.)

Keys to Success

ORGANIZATION

- Differentiation from the norm
 - Novel and Agile care delivery model
- UF involvement
 - Medicine becomes Driver
 - Closer Hospital Relationship which can improve things such as crew delays at facilities
 - Connection with Shandscair and increased educational opportunities
- Public, private, academic partnership

PERSONNEL

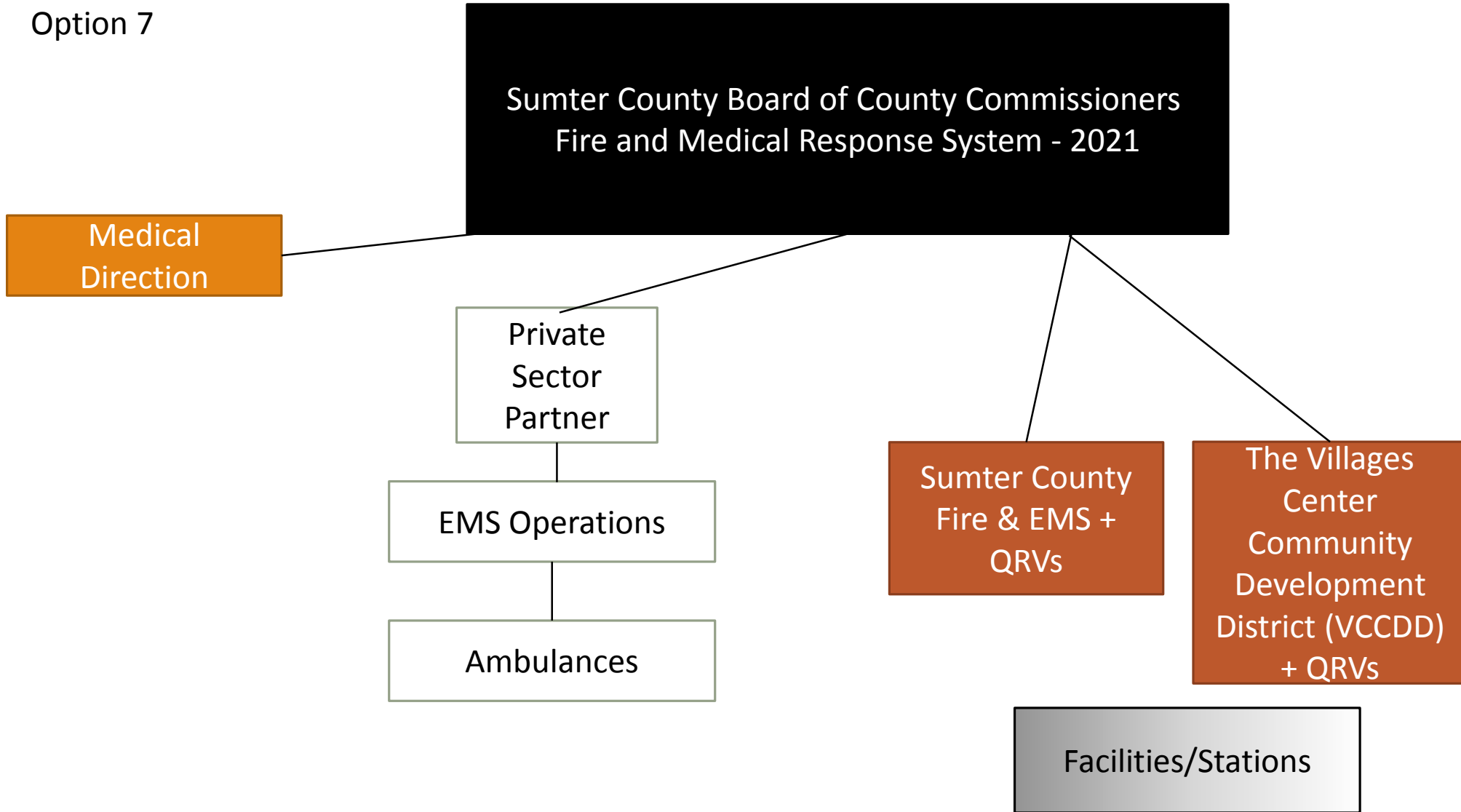
- Attract
 - Pay
 - Differentiate from other organizations
- Retain
 - Pitch a vision
 - Create career advancement/longevity opportunities
 - Integration with the community creates “Sense of Purpose”

Benefits to the Citizens

- Fast response times with roaming community-based units
- Dedicated Medical First Response Units
- Increased care options including:
 - Immediate nurse access
 - Telehealth option
 - Ability to go to Urgent Care/Offices
- Time for communities to get to know their crew members
 - Teaching CPR and AED classes
 - Teaching Stop the Bleed
 - Other community interest-based classes
- Crews feel more engaged
 - Leads to better recruitment and retention
 - Leads to better care!

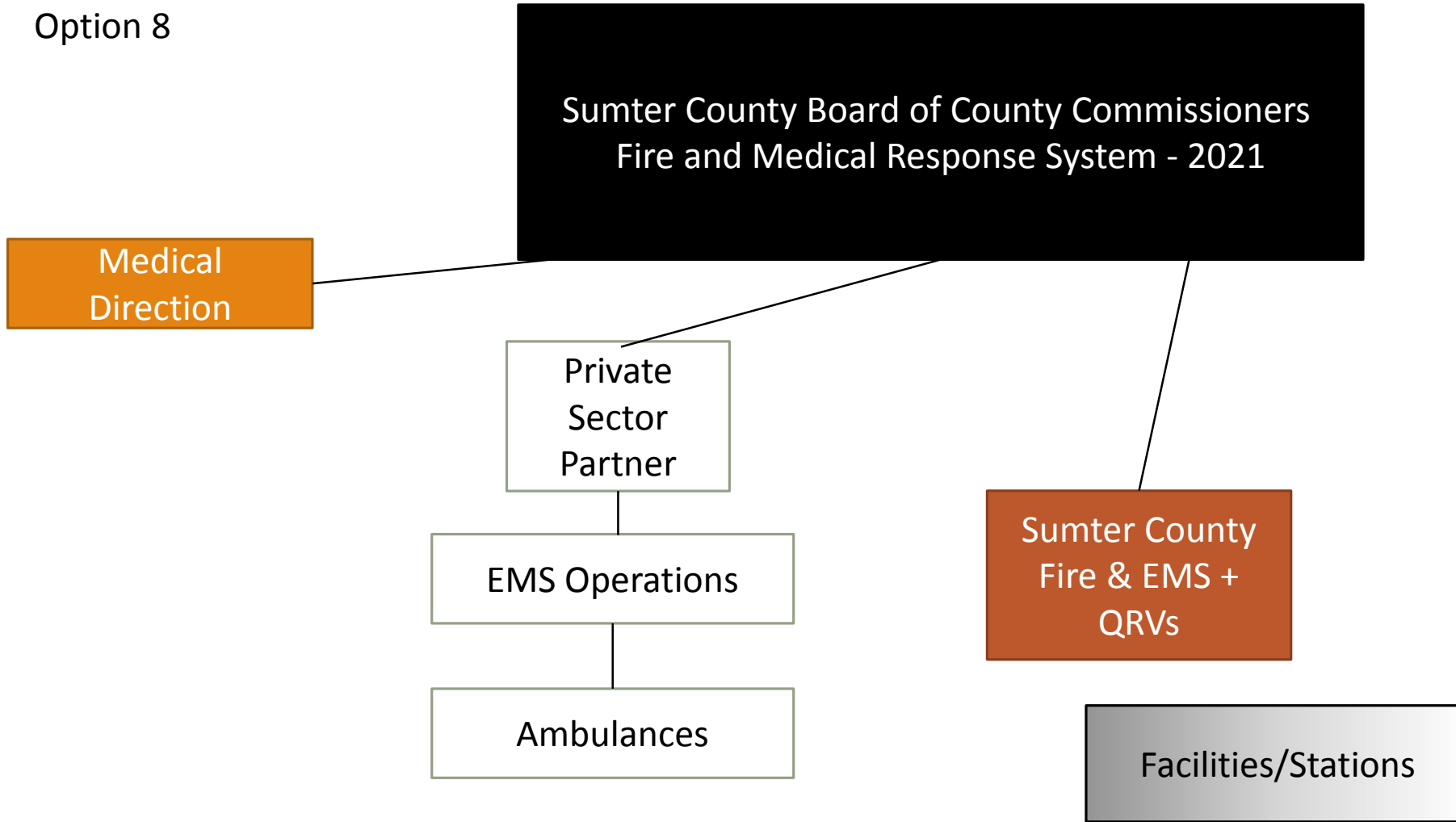
Option 7

With QRVs



Option 8

With QRVs



Option 9

With QRVs

Sumter County Board of County Commissioners
Fire and Medical Response System - 2021

Medical
Direction

Sumter County
Fire & EMS +
QRVs + EMS
Operations +
Ambulances

The Villages
Center
Community
Development
District (VCCDD)
+ QRVs +
Ambulances

Facilities/Stations

Option 10

With QRVs

Sumter County Board of County Commissioners
Fire and Medical Response System - 2021

Medical
Direction

Sumter County
Fire & EMS +
QRVs + EMS
Operations +
Ambulances

Facilities/Stations