MINUTES OF THE CITY COUNCIL

CITY OF AUSTIN, TEXAS

Special Meeting

August 22, 1974 11:00 A.M.

Electric Auditorium 301 West Avenue

The meeting was called to order with Mayor Butler presiding.

## Roll Call:

Present: Councilmen Binder, Dryden, Handcox, Lebermann, Mayor

Butler, Mayor Pro Tem Love

Absent: Councilman Friedman

Mayor Butler announced that this was a Special Called Meeting of the City Council for the purpose of a Work Session on the Emergency Medical Service System and publicly announcing that during the meeting it would convene in a closed or executive session authorized by Section 2, Paragraphs (e), (f), and (g) of Article 6252-17, Texas Revised Civil Statutes Annotated.

Dr. Robert Dennison, President of the Travis County Medical Society, stated that the Council had before it a resolution passed unanimously by the Society regarding this new type and approach to emergency medical treatment in Austin. He added that he had given the Council reprints of some material. He noted that this was not an untried system in that in had been implemented in Houston, Dallas, San Antonio, Corpus Christi, and Tulsa, Oklahoma, and that this system involved taking the emergency room to the patient and would require modern updated equipment. He indicated that the basis for this system was personnel, and he felt that this system's financing could be handled best on the public utility system because of the cost element involved. In conclusion, he stated that representatives of the medical profession were present who would be happy to answer any questions the Council might have.

At this point City Manager Dan Davidson noted that the Emergency Medical Service Report had been submitted to Council on August 15; and at the request of the Council, additional figures had been prepared in connection with the first-year cost. Mr. Homer Reed, Deputy City Manager, reviewed this by stating that the Fire Department and Department of Urban Transportation had been requested to prepare figures on a fiscal year basis, assuming that the present contract would continue to termination date in December, 1975, with Austin Ambulance Service, thereby placing the system into effect on January 1, 1976. He noted that they had met with representatives of the Travis County Medical Society and had reached a point where their figures were close enough.

Mr. Reed reviewed the development costs for the first year, fiscal year 1974-75, assuming operation by the Civil Service, as being \$254,870 with salaries of personnel in training and other related costs totalling \$269,789, for an overall total of \$524,659. He noted that after receiving these reports, they met with Drs. Maurice Hood and Tom Kirksey, Councilman Dryden, and Mr. Bob McDonald of the LBJ School; and Drs. Hood and Kirksey went throughtthe proposed budget in some detail and suggested that some modifications in the equipment requirements could be made, and they suggested that 7 Modulances could be utilized instead of the eight proposed in the report, which would effect a reduction in initial capital costs by approximately \$40,000. He added that this would result in a reduction of the amount of funds to be added to the budget to \$484,000.

Mr. Reed noted that there had been some remarks made with regard to reducing the number of units from 8 to 7. In response to Mayor Butler's question, Mr. Reed stated that there were 4 units available to run at all times in Austin, Houston had 23 stations and 5 units, and Dallas had 16 stations and 6 units. He had no doubt about the City's capability to start with 7 units, with the understanding that ultimately there would be an additional unit needed for standby.

Mr. Reed stated that they had determined that annual operating costs at present dollar value in 1976-77 and thereafter would be \$848,945. With regard to personnel, he indicated that it was the belief of Chief Ed Kirkham, Fire Department, that he could accomplish training after the first year on duty time. He indicated that the cost of the privately owned and operated system would be somewhat less than municipally owned and operated within a Civil Service unit for the following reasons:

- 1. Lower wage rates.
- The City did not have to "bite the bullet" on the initial capital outlay.
- 3. Ability of private system to operate the transfer service and offset that revenue against the total cost of the system.

  The City would not be able to do this since there was a franchise on the transfer service by Austin Ambulance Service.

He noted that there were some offsetting advantages to the City's operation:

- 1. Less turnover in the Fire Department than in the Austin Ambulance Service, which would give more continuity and better level of service.
- 2. Wouldlimit any problem of having any delay in response time.

In response to Mayor Butler's question, Mr, Reed indicated that the operating cost for fiscal year 1975-76 would be \$793,760. In response to Councilman Binder's question, Mr. Reed further indicated that revenues were estimated to be \$185,000 for a full 12 months' operation.

In response to Councilman Binder's question with regard to why the City could not take over the transfer service, Mr. Jan Kubicek, Assistant City Attorney, stated that the contract with Austin Ambulance Service expired December 31, 1975, and there was a 20-year franchise with 16 more years to go.

In response to Councilman Binder's question with regard to the cost for municipally owned and operated but not through the Civil Service, Mr. Reed reviewed the figures for operating costs for 1976-77 as being around \$900,000 as compared to \$848,000 for municipally owned and operated through the Civil Service.

At this point, Dr. Dennison introduced Dr. Jack Williamson as being President and Coordinator of Bexar County/San Antonio Emergency Medical Council. Dr. Dennison noted that Dr. Williamson had been appointed on a joint basis by the Council of San Antonio, the County Judge, and the Medical Society. Dr. Williamson indicated that there were some basic points to the Emergency Medical System:

- 1. On the scene first aid.
- 2. Highly trained personnel
- 3. Transportation.
- 4. Communication with a 2-way radio. He noted that in San Antonio the emergency technicians were always in contact with the doctors and could function just as a nurse inthhe emergency room.

He reviewed the process they undertook to develop the system in San Antonio, stating that they first visited Houston and with the Medical Society a Community Council was formed. He noted that the Council was a broad based citizens' group comprised of elected officials; governmental staff; organizations such as police and fire, Civil Defense, Red Cross, National Safety Council; i.e., all groups in the community who might play a role in this service. He continued by stating that the Council was formed and designed into task forces and came up with a written plan, which he stated he would leave with one of the City's representatives. He added that they then applied for revenue sharing funds, which is how their system is funded; and they became operational on March 1, 1974.

It was his understanding that in Austin the citizens paid \$35 per year per citizen for police protection; \$30 per year per citizen for fire protection; and 25 cents per year per citizen for ambulance service. He noted that the new system would entail \$2 per year per citizen. He felt that this was not an unrealistic figure. In response to Councilman Binder's warlier question, Dr. Williamson stated that these vehicles should be available for emergency not for transfer business; and because of this, it would be too expensive for private enterprise to do it. He noted that the idea was to have this vehicle with trained personnel at the fire station for sharp response time.

Because he felt the Community Council was such an effective vehicle in San Antonio, he recommended that the City Council use this approach.

In response to the Council's questions, Dr. Williamson stated that the Community Council was appointed before the system was approved, that it was on a County-wide basis, and that contributions were on a per capita basis. In response to Mayor Butler's question, Dr. Williamson stated that they had studied Tulsa's system to some extent, but he was not that familiar with it. He felt that a municipally owned and operated system was preferable in that because there were so many things that needed to be done, it would be difficult for a private enterprise to do it. In connection with this, Mayor Butler noted that

Tulsa's system was privately owned and operated and functioning well.

In response to Mayor Pro Tem Love's question with regard to whether or not the Community Council tried to determine the best possible way the emergency medical service should be handled, Dr. Williamson stated that a 3-man team from Southwest Research Institute handled this in such a manner so as to try a private enterprise if at all possible.

In response to Councilman Binder's question, Dr. Williamson stated that in Austin a response time greater than 8 or 9 minutes would be unacceptable.

In response to Mayor Pro Tem Love's comment that the Community Council was an excellent idea but that it was not included in the budget, and it would, therefore, be unwise to consider before approving the system as a budget item, Dr. Williamson noted that their Council was formed 18 months before becoming a budget item.

Upon Mayor Butler's request, Mr. Joe Ternus, Urban Transportation Director, reviewed Tulsa's system, noting that it was one of the better privately owned and operated systems which began approximately 5 years ago without any assistance from the local government. He added that the private operator trained the individuals, bought the equipment and worked out programs with various hospitals in Tulsa. He noted that only about a year ago because of the cost factor, the operator went to the City and requested about \$228,000 in operating costs from the City.

In response to Mayor Butler's question as to how long it would take before the system could begin operation assuming there was not an outstanding contract with Austin Ambulance Service, Mr. Ternus stated that it would require from 8 to 10 months for the municipally owned and operated and from 3 to 5 months for privately owned and operated. City Manager Davidson noted that the 5-month figure was based on the present contract under which provisions were made so that if the City wanted to upgrade payments available as revenue to the private company, they could upgrade the units presently operated plus upgrade units presently on order by that company.

Ms. Francie Breyfogle, President of the North Austin Civic Association, noted that they had been working on this for several months and that she had been contacted by approximately 100 citizens out of the North Austin area, and their concern was about the budget; but they wondered where the line could be drawn between a life and the budget. She further noted that many of the people felt that if it could not be worked into the budget, it should be added to their utility bills because they were willing to pay for it assuming the City used the guidelines it had in the past for getting the citizens the best service for the right price.

In response to Mayor Butler's question, Ms. Breyfogle stated that they felt this service should be municipally owned and operated because they felt the City would have stricter controls and higher standards in reference to education of the technicians through the Fire Department. She wanted to clarify a point that had caused some misunderstanding among some of the people, stating that the City was not talking about a person in a dual role but that they were talking about a profession where there would be less turnover. She also recommended the Community Council be considered.

Mayor Pro Tem Love felt that this matter should be deleted until the budget work session on Tuesday, August 27, at 4:00 p.m.

Dr. Maurice Hood stated that some 460 physicians in the community had told the Council that the current system was inadequate and did not say that the proposed system should be operated privately. He felt that the City was losing lives by not having this system. It was his opinion that this could be done in less than 30 days if necessary but added that it was not desirable. He pointed out that the critical part of emergency medical service was the fact that citizens should realize this was medical care under control. He felt that the physicians had no working relationship with Austin Ambulance Service and that they could not provide this service.

In response to Mayor Butler's question as to whether or not all 460 physicians voted for the system, Dr. Hood indicated that it had been a unanimous decision at a Medical Society meeting with over 100 physicians in attendance.

Mr. Robert J. McDonald appeared assa former representative of the City Manager's office in San Antonio. He felt that the tax payers would be more than willing to pay for this service. He referred to some letters that had been written to one of the newspapers in San Antonio, in which the writers had indicated that they would not mind having their taxes raised if this was necessary to have the system.

Mr. Conwell Smith, owner of Austin Ambulance Service, felt that his company could perform the service required by the physicians. He noted that Houston did not have a private system because there were 8 or 10 companies, and they could not make any agreement with any one of them. He added that in Dallas there were 2 companies who used discriminatory practices, and in Corpus Christi the only company finally quit. In regard to turnover in the Fire Department, he noted that the budget called for 173 people, but bhere were only 154 people on the payroll; and the City was recommending 179 for next year. In regard to Mr. Ternus' estimate of 3 to 5 months for the private system to be effective, Mr. Smith felt that this could be improved because he had radio equipment but was waiting for Brackenridge to "go on the air."

He also felt it imperative that a decision be made as soon as possible on who would be providing the transportation for the system. He noted that he had 20 to 25 fine employees who were well trained and well qualified, but he wondered how long he could keep them on as soon as they found out the City would be handling this. He requested that they be allowed to upgrade the service now; and if they could not satisfy the needs, they would sell the franchise.

In response to Mayor Butler's question with regard to when Mr. Smith could provide the service as specified in the report with the same classification of trained personnel, same numbers of vehicles, etc., Mr. Smith stated that if the Council were to authorize this operation to begin this afternoon, they could be in operation on December 1. In response to Dr. Hood's comment that Mr. Smith did not have advanced emergency medical technicians, Mr. Smith stated that they had four. Dr. Hood did not believe they were licensed technicians; however, Mr. Smith stated that they were. A gentleman from the audience stated that he was a registered emergency medical technician and that he had checked with the State Health Department, and they had told him there were 8 registered advanced technicians in Austin and that all were employed full time for the State Health Department. He added that he did not contest Mr. Smith's remarks but they were

not known to the registering agency of the State of Texas as full-time employees. It was established that the 4 employees of the Austin Ambulance Service were full-time employees for the Health Department and worked part time for Austin Ambulance.

There was discussion by the Council with regard to some of Austin Ambulance's employees leaving, despecially toward the end of the transition. Mr. Reed indicated that he wanted to recruit as many of them as possible to become firemen.

After further discussion, it was determined that the emergency medical service be considered as a specific item during the budget work session on August 27.

The Council adjourned at 12:55 p.m. to go into an Executive Session.

APPROVED:

ATTEST:

City Clerk