



# Pinellas County FIRE CHIEFS' ASSOCIATION

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November 7, 2005

## Letter of Transmittal

Pinellas County Charter Review Commission;

I would like to thank you for the opportunity to present information on behalf of the Pinellas County Fire Chiefs Association regarding the fire and emergency services study.

The fire chief's association has concerns with the poor quality and misinformation presented in the MGT study. More importantly, there are concerns that this study will be accepted without a true understanding of the proposal, negatively impacting service delivery to the citizens of Pinellas County. An in-depth response to the report is enclosed for your consideration; however, I would like to point out some major concerns contained in the study:

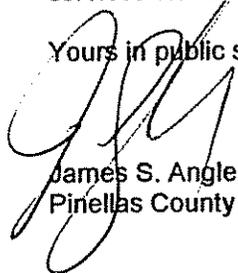
1. The report identifies the closure of three to eight fire stations; and the closure of three to eight fire stations in the evening hours. The consultant utilized an arbitrary benchmark of two hours run time as a basis for this recommendation. Also, the consultant did not see fit to repeat the actions of the 1992 study by identifying specific stations for closure. For the record, the 20 choices for these closures include the entire barrier islands from Pass-a-Grill to Sand Key, Tierra Verde, Shore Acres, from Oldsmar north to the county line encompassing both the Oldsmar and East Lake fire districts, Clearwater's new station 51 which was built specifically because of response time needs, 50 percent reduction of service in Tarpon Springs, two stations in the Belleair Bluffs/Largo area that are cooperatively operating out of one fire station with two different types of apparatus, 25 percent reduction of service in the Palm Harbor area, 25 percent reduction of service in Seminole and the elimination of the main-land Indian Rocks Station. In addition to the permanent closures, those stations closed in the evening hours could create significant confusion for the public and local liability in the event of someone goes to the fire station in their time of need and finds it closed. The closure of fire stations, whether permanently or periodically, would increase response times for both fire and other emergencies.

2. The report recommends the implementation of priority dispatch which would reduce the current level of care to the community. There are many medical options for the public. They can go to their personal physician, a walk-in clinic, emergency department at a hospital or dial 9-1-1. There is only one place you can call for fire suppression. Fire departments are geographically placed and are staffed 24 hours a day to provide fire suppression coverage. The evolution of the fire departments to provide emergency medical services was due to their proximity, availability and duty to serve. In the post-9/11 era, the duties and responsibilities of the fire departments have expanded even more to an all-hazards response and service to the community. As public servants, dual-role firefighter/EMTs and firefighter/paramedics provide greater versatility of services for the amount of financial investment. Minimizing or reducing the services provided by dual-role firefighter/EMTs & paramedics and transferring these services to another private agency will only increase the overall costs for fire and emergency services in Pinellas County.

Further, what was not considered or evaluated by the consultant were the operations of the emergency transportation system component of the service. The study indicated the budgeted expenditures for the Sunstar Ambulance Contract totaled \$22.4 million. If fire departments were to expand in the area of emergency transportation, through the use of dual-role firefighter/EMTs and firefighter/paramedics which are already strategically placed throughout the county 24-hours a day, this would be a significant enhancement to both the emergency medical and the fire suppression components of the fire and emergency services system.

Once again, I appreciate the opportunity to speak to you on the topic of fire and emergency services and am available at any time to discuss any of your questions or concerns.

Yours in public safety,



James S. Angle, President  
Pinellas County Fire Chiefs' Association

**PINELLAS COUNTY FIRE CHIEFS' ASSOCIATION  
POSITION PAPER ON**

**Pinellas County Charter Review Commission's  
Fire and Fire Rescue Services Improvement  
Study prepared by MGT of America**

Prepared and Presented by the  
Pinellas County Fire Chiefs' Association  
November 7, 2005

The following position paper is submitted by the Pinellas County Fire Chiefs Association (PCFCA) to the Pinellas County Charter Review Commission (CRC) in response to the Final Report that was submitted at the 11/07/2005 CRC meeting.

The PCFCA would first like to reiterate our initial position regarding the study and the process of the study. In our joint position statement submitted in conjunction with the Pinellas County Council of Firefighters we stated the following.

***Both parties agree that Chapter 6 of the 1991 MGT America report, inclusive of the updates in 1998 and 2002, are flawed, provide inaccurate and unreliable information, and is a poor representation of the fire service in Pinellas County today. An analysis of the 2002 update was performed in 2002 to highlight these inaccuracies. This analysis is currently being updated to reflect the current status as it relates to the MGT report. Further, none of the information found in Chapter 6, Fire Services, of the MGT, should be used to, in any way, alter the current fire/EMS delivery model in Pinellas County.***

***Further, if a desire exists to again study the existing fire/EMS delivery model in Pinellas County, the parties agree that they can support a new study, only if all of the stakeholder groups are involved in the process and if the study is based, from the beginning, on a defined service delivery level. A sample RFP is being developed which would allow for a comprehensive analysis of the complete Fire/EMS delivery system.***

With specific attention to the second paragraph, we remind the Commission that each party had hoped that the study would not be undertaken, however if the desire existed, that stakeholder groups would have input. The stakeholders did have input, however, a defined service delivery level was never discussed, nor determined at the beginning of the study. Further, not all of the critical areas for fire protection and EMS delivery were studied, therefore making MGT's final report flawed and invalid.

The following is documentation of the flaws in the report and examples of the misrepresentation of the data.

## **INTRODUCTION**

In 1991, Pinellas County government commissioned a consultant study on government efficiency within Pinellas. The consultant firm of MGT America was selected to perform the study. The consultant was charged with examining many service areas. The MGT report was provided to the county commission and the commission appointed a charter review advisory committee. Chapter six of the consultant report examined the fire service. While the MGT report generated a lot of controversy, none of its recommendations were ever implemented. At the time of the report's release, the Pinellas County Fire Chief's Association found many examples of the consultant's oversights and inaccuracies. Further, a majority of the Pinellas fire service organizations had no input into the report, nor were they contacted by the consultants prior to the report's completion. In 1998 the MGT America study was pulled from the shelf. Chapter Six, dealing with the fire service, was revised by Pinellas EMS and Fire Administration managers. The revised report, still with its inaccuracies and oversights, was provided to the Pinellas County Commission appointed Charter Review Commission. The Pinellas County Fire Chief's Association felt strongly that the fire service was being misrepresented once again. The Association members created a rebuttal report and presented it to the Charter Review Commission. Once again, none of the MGT America recommendations were acted upon.

Again in 2002 the 11 year old report was revised by Pinellas County EMS and Fire Administration managers. The EMS and Fire Administration managers met on two occasions with members of the Pinellas County Fire Chief's Association. These meetings were to examine the revised information and discuss the merits of attempting to revise the decade old study. All parties agreed the report was flawed and a poor representation of the fire service in Pinellas County. The Pinellas County Fire Chief's Association requested that County government not utilize the report based on its age and controversy. No action was taken on the revised report.

The 2005 County Charter Review Commission hired MGT of America to study again the Fire and EMS delivery system in the County. After requests by the Fire Chief's Association to not do the study, it was undertaken in mid 2005. The PCFCA and PCCFF requested that the study be comprehensive and be based on a minimum service delivery level from the outset. Unfortunately, because of budget constraints with the project, key areas of the Fire/EMS system were not included as part of the study.

This position paper has been created to provide those readers of the MGT America study a fair and balanced view of the study from the Pinellas fire service organizations. The 2005 MGT report sought to quantify the costs of providing fire protection services. No attempt was ever made to examine the level of service in Pinellas communities. Further, no study was undertaken to quantify the effectiveness of the Pinellas fire service model. These omissions put the Pinellas County Fire Chief's Association in a position of deep philosophical difference with the methodology of the entire study. As a result, the consultants provided a report that addressed cost efficiencies only.

#### **SCOPE OF WORK**

As part of the review of the Final MGT report, the approved Scope of Work (SOW) was compared to the final product determining the completeness of the final report. The following comments are based on this comparison.

SOW Page # 1 - The study for the Fire element will provide findings and recommendations based on appropriate and relevant standards and benchmarks.... *We do not find any standards or benchmarks comparing our delivery to similarly situated Counties. There are obvious relevant standards including NFPA 1710. There are applicable laws including Florida Statute 633. These are just two of many examples.*

SOW Page # 2 – Communication - We place significant emphasis on gathering internal stakeholder input during this study. We see part of our job as helping the Commission build a consensus for necessary change, and helping the various organizations understand the needs and wants of its citizens and stakeholders in order to provide better services. – *We are unaware of any attempts to gather stakeholder input with the exception of the County Staff, Fire Chiefs and Council of Firefighters. We are not aware of any citizen surveys or focus groups being conducted. We are also unaware of any discussions with elected officials of Cities or Special Districts to get the input of these obvious stakeholders.*

SOW Page # 4 - Task 3.0 Identify Best Practices and Industry Standards – *We do not find any standards or best practices referenced in the final document as they pertain to fire delivery, training, and code enforcement. While some research is noted for EMS service delivery, it is not necessarily tied to best practices or industry standards.*

SOW Page # 7 – Activities

- County and city organization charts; *No reference to department organization chart research in the report.*
- authorized and filled positions for both departments – *No discussion on current or expected staffing*
- personnel rosters and position descriptions – *No explanation of study on any specific positions and their responsibilities.*
- budgets and financial reports – *Unknown, what, if any, research was done on specific budgets of individual departments.*
- strategic and operational plans – *No reference to strategic or operational reports.*
- routine management and operating reports – *No description of findings.*
- key statutes, ordinances, resolutions, and/or policies – *Some key statutes noted in the background. No reference to Florida Statute 633 as it relates to firefighter safety and staffing requirements.*
- Request that each service provider provide information regarding their mission, goals, programs, responsibilities, functions, and key issues as well as their expectations/desires for this project – *Not sure where the "key issues and expectations" for the project were identified or reported from fire service stakeholders.*

SOW Page # 8 –

- Identify four-to-five similarly situated counties for comparison. – *Not Done*
- Determine the relevancy for benchmarking and research. – *Not Done*
- Identify appropriate performance standards – *Not Done*

SOW Page # 9 & 10 – Activities

- current organization charts showing number of authorized positions as well as any positions currently vacant – *No Reference in Report*
- policy and procedures manuals – *No Reference in Report*
- annual work plans and annual performance/operating reports – *No Reference in Report*
- performance measures and/or level of service standards - – *No Reference in Report*
- workload volumes for primary work functions/activities for the past two years – *Complete for Medical and Fire Incidents Only*
- routine operational data and management reports (manual and computerized) - – *No Reference in Report*
- list and brief descriptions of data processing systems being used - – *No Reference in Report*
- facilities and equipment and their condition - – *No Reference in Report*
- training programs – *While a paragraph in the report explains the training program, there is no reference to the number of programs or hours spent annually on training, this information is available.*

SOW Page # 10 - To evaluate the ability to prevent the outbreak of fires; ensure the enforcement of codes; investigate the cause, origin, and circumstances of fires; maintain a safe and effective response capability; and protect citizens' life safety and property against the dangers of fire and other emergencies – *Brief paragraph presented on code enforcement. Nothing noted on the primary cause of fires, or any reference related to a safe and effective response capability to be measured and maintained.*

SOW Page # 10 & 11 – Activities

- organizational structure, using the following criteria: - *Find no reference to any of the following*
  - actual and "official" organization structures are comparable;
  - related functions grouped within the same organizational entity;
  - clear lines of authority and accountability;
  - supervisory spans of control of three to ten direct reports; and
  - few, if any, one-on-one reporting relationships.
  
- operations, including - *Find no reference or measurement to any of the following*
  - appropriate and adequate operating policies and procedures;
  - effective and efficient work processes, workflow, methods and procedures within and among departments;
  - appropriate use of information technology;
  - adequate employee skills/capabilities and ongoing training programs; and
  - adequate and well-maintained facilities and equipment.
  
- customer services, including - *Find no reference to any of the following*
  - specified programs and services provided in accordance with legal mandates;
  - desired results or benefits achieved;
  - customer-orientation with a clear focus on service timeliness, responsiveness, and effectiveness;
  - adequate external communications;
  - routine reports regarding customer requests and complaints; and
  - periodic measurement of overall customer satisfaction.
  
- costs, including - *Find no reference to any of the following*
  - supported, justified budget requests;
  - actual expenditures compared to budget;
  - efficient utilization of staff resources;
  - economic acquisition and utilization of equipment and operating resources; and
  - not mandated/nonessential services.
  
- management practices, including - *Find no reference to any of the following*
  - informed and timely decision-making at appropriate levels;
  - meet performance expectations;
  - use of sound resource allocation and scheduling techniques;
  - maintain balance between workload and staffing levels;
  - use of routine management and operational reports that incorporate appropriate performance measures; and
  - adequacy of internal communications.

SOW Page # 12 - Outline an improvement recommendation for each significant function, where appropriate. The recommendations will focus on improving services, reducing costs without adversely affecting services, and on correcting identified deficiencies including:

- fire response and suppression – *No focus on improving services or the impact of the recommendations on existing services.*
- fire/EMS training – *No substantive research documented*
- EMS Services - *No focus on improving services or the impact of the recommendations on existing services.*
- code enforcement and fire prevention - *No substantive research*
- specialized response teams – *No Reference at all*

#### SOW Page # 13 - Activities

- executive summary:
  - project objectives;
  - listing of commendations and recommendations for each department – *Not completed for each department*
  - summary of functional fiscal impact statements – *No fiscal impact statements provided.*
- separate chapter for each of the functions containing: - *Not all functional areas described in the scope are considered. There is no supporting documentation. No fiscal impact, no timelines, and no implementation strategies.*
  - review methodology;
  - background:
    - \* organization and staffing;
    - \* budget; and
    - \* primary programs and operations;
  - commendations, each with supporting facts and/or opinions;
  - findings, each with supporting facts and/or opinions;
  - recommendations, referencing related finding(s) and describing the change and its justification in detail;
  - implementation strategies, plan, and time line—specifying what should be done, primary responsibility, schedule; and
  - fiscal impact, consisting of a chart that lists each recommendation and the savings, implementation costs, and net fiscal impact.

#### REPORT

Page # 1-2 - The Pinellas County Fire Chiefs' Association expressed concerns regarding the 1992 study and suggested parameters for the 2005 study. *The Pinellas County Council of Firefighters also expressed concerns regarding the 1992 and 2005 study. They also were involved in the suggested study parameters.*

Page # 1-3 – *Areas to be studied included specialized response teams. No mention of these teams in the report.*

Page # 1-4 – *The report states that interviews were conducted with emergency services representatives in numerous cities throughout the country. While the report does allude to operations in six jurisdictions, with regard to priority dispatch, there is no mention of other departments in the findings related to the fire delivery. Further, there is no documentation*

*regarding how the six jurisdictions compare to Pinellas County in terms of size, complexity, and levels of service.*

*There is discussion of an onsite visit to the Thurston County Washington Dispatch Center. According to research conducted by the PCFCA, Thurston County has 236,430 people in 758 Square Miles or a population density of 311 people per square mile. Most of the fire districts are volunteer BLS providers. There are approximately 20,000 EMS incidents per year. We are unsure what comparisons or conclusions are useful in this report and what could be gained by studying a system so different.*

*Page # 1-6 – It is noted in Exhibit 1-1, that Pinellas County's population is still expected to increase. It is also noted that Pinellas County is the most densely populated in Florida. Further, the median age is higher, as is the disability status. Also, Pinellas County has the second highest number of residents in nursing homes. These demographics support some of the reasons that the current fire/EMS delivery system is in place.*

*Page # 1-7 - Four fire districts operate under the authority of a local fire board. Although fire districts are considered primarily rural (unincorporated) areas, three of the districts are, or have, primarily urban-type areas. – It is not clear on the meaning of this statement, nor how it affects the findings, however, for the record, there are a number of special fire control districts throughout the state that deliver service in both urban and suburban settings.*

*Page 1-7 - The city fire departments are a mixture of large and small departments. The largest, St. Petersburg, accounts for about **50 percent** of the fire services under city management with 13 stations, while several coastal cities have one or two stations and minimal equipment. Exhibit 1-2 on page 1-8 indicates that there are 50 fire stations under city management and that would mean that St. Petersburg would represent **26 percent** not 50.*

*Page # 1 -10 – Exhibit 1-4 – While useful in demonstrating current costs for the entire system, the information means nothing without some comparison to similarly situated jurisdictions. Without some sort of benchmark there can be no conclusions made about the costs of the Pinellas County System.*

*Page # 1-13 - While there are many response codes, the County collapsed them into two primary codes, medical and fire. The method of "collapsing" the various call types into two primary codes leads to a misrepresentation of the information. For example, an Air Transport Incident is classed as a medical call. In reality, while a patient in medical distress is the reason that the air transport occurs, a fire response is necessary in order to set up a safe landing zone for the aircraft crew and people on the ground, as well as the patient. This requires the response of at least an engine company, and most often a district chief, in addition to the initial medical response. This inaccurately leads to a conclusion that 3 vehicles had responded to a medical call. A better way to examine the number of units responding to incidents is to examine each code which is easily done and included as part of this report on the next page.*

*Page 1-13 Exhibit 1-5 - The number of responses in calendar year 2004 was 152,882. In that year, the number of medical coded responses was **125,966**. The number of responses is correct and can be validated by date in the 911 computer system. Using the information in Exhibit 1-5 and by adding all of the emergencies in 2004 that were identified as medical, the total will be **125,940**. The number 125,940 is correct and can be validated by data in the 911 computer.*

*Page 1-14 – The vast majority of calls (75%) occurred between 8:00 a.m. and 10:00 p.m., with peak hours of 11 a.m. to 6 p.m. This data has led MGT to the conclusion that one alternative delivery model might be to close some stations or units during the non-peak hours from 10 p.m. to 8 a.m. The PCFCA strongly opposes this concept. Although the number of incidents does drop during these hours, the seriousness of incidents increases. At night, fires are often not discovered as early and therefore fires often are larger and further progressed on the FD's arrival.*

*In terms of residential fires, it should be noted that according to the United State Fire Administration's Report: **More than half of residential fire deaths occur in fires that start from 10:00 p.m. to 6:00 a.m. The peak night hours are from 2:00 to 5:00 a.m., when most people are in deep sleep. Further, in this same report there is a noticeable increase in property loss from fire occurring between midnight and 6 a.m.***

Page 1 – 15 – Mutual Aid Analysis – *This would be better described as the Automatic Aid Analysis. The conclusions raised and reported in this section are some of the most inaccurate in the report. Exhibit 1-7 contains a serious flaw. The three rows on the bottom are mislabeled. Therefore, the conclusions released about how much automatic aid is given/received by each department is actually backwards. The comments regarding the most given and the most received are not valid.*

**RECOMMENDATION: Due to the serious error in the documentation regarding Mutual (Automatic Aid), THE ENTIRE SECTION SHOULD BE REMOVED FROM THE FINAL DOCUMENT BECAUSE IT IS FALSE AND MISLEADING.**

Page #2-1 - Both fire chiefs and the County's EMS/Fire Administration personnel have noted that there are fewer than 500 fires per year now requiring suppression activity. – *It is unclear as to how the consultant reached this conclusion. If it is related to the number of times the working fire file is activated, then it is not valid. There is no correlation to the number of times the working fire file is activated and the number of fires in which suppression activities were initiated. According to the report, the fire departments responded to 3,447 structural responses, 776 unconfirmed structural fires, 80 brush fires, 7,145 fire alarms, and in addition, 799 vehicle fires (according to NFPA report). One simple measure, although it might not account for all suppression activities, would be the number of incidents where "water on the fire" is reported to dispatch. In 2004, this occurred 771 times, indicating that at least 771 fires required the application of water as a suppression activity. Of course, there are other means of fire suppression.*

Page # 2-2 – *The brief description and commendation on code enforcement does in no way measure the productivity and effectiveness of the processes. There is no consideration for the time spent by fire companies in fire inspection and code enforcement activities. No consideration is given to the fact the most fire prevention staff personnel are cross-trained in other duties including fire investigation, plan review, public education/information and many are also certified firefighter/paramedics. As compared to the suggested study parameters reprinted below, this section is a totally inadequate representation of code enforcement and fire prevention activities throughout the county.*

Code Enforcement and Fire Prevention – Evaluate the fire services ability to staff and conduct annual code compliance inspections within commercial and industrial properties. Study the effectiveness of working relationships between fire inspection and building inspection organizations. Evaluate the capability of fire service organizations to conduct plans examinations of site development, building and internal systems construction drawings. Evaluate the fire code compliance quality assurance programs within the Pinellas fire service organizations. An effective fire code compliance program is critical in providing quality, cost effective fire protection to our communities. It is also the first line of defense to protecting firefighter's lives while operating within buildings during fire and other emergency incidents. Qualified code inspectors should be on each fire company. Inspectors must be provided with a continuing education program to ensure their knowledge of codes and enforcement procedures are current and up-to-date. Code compliance programs must take advantage of technology advances to put the working tools for inspectors in the field to speed the inspection reporting process, sharing building hazard information with firefighting crews and providing compliance requirements to building owners.

Page # 2-3 – *Fire and Fire Rescue Training - The brief description and commendation on Fire and Fire Rescue Training in no way measures the productivity and effectiveness of the processes. There is no consideration for the time spent by fire companies in fire and EMS training. There is no reporting of the total hours that a firefighter spends doing in-service fire and EMS training throughout the year. No consideration is given to the fact that most Training officers also function in other capacities in their departments, most commonly, health and safety. As compared to the suggested study parameters reprinted below, this section is an inadequate representation of training activities throughout the county.*

Fire/EMS Training – Evaluate in-service training programs and determine if they are being provided with the goal of procedure standardization for all Pinellas automatic aid companies. Further, study the in-service training programs and make recommendations to improve the programs so as to garner additional points for ISO evaluations. Training programs and supporting policies should ensure that all personnel are trained and can demonstrate competency to execute all responsibilities within personnel assignments for fire suppression activities, EMS functions and specialized training necessary for firefighter safety and survival.

Page # 2-5 - Ambulance (EMS) Services – On page 2-5 and 2-6 a description of the ambulance service is provided, and a commendation issued. The purpose of the request to include ambulance services was to identify opportunities that might exist if the fire departments would have more involvement in transport. From the original suggested study parameters:

"Evaluate the current method and equity of funding for fire-based first responder units. Study the efficacy of a single-tier fire service based EMS first responder and transport service to emergency medical calls supported by a non-fire based component for non-emergency medical transports. Assess EMS response times utilizing a fractal measurement methodology and evaluate the system's current performance. Evaluate future traffic, roadway, and transportation issues as they affect station location and response times of fire-based EMS first responders."

*The description and the commendation of the current system hardly meets the intent of the study parameter suggested and approved by the CRC.*

Page 2 – 8 – According to the Fire Chiefs, Automatic Aid has led to a fire department/district response time of less than five minutes, exceeding the national guidelines for response as well as the Pinellas County contract for EMS response. *It is unclear where this statistic comes from. Is it an average of five minutes, or a fractal measurement? If fractal, what is the percent the five minutes of less is achieved. What national guidelines are we exceeding? The PCFCA has never provided this information. If it is from one or more particular departments this information should be provided.*

Page 2-9 to 2-14 – *The exhibits shown and described in the text of these 6 pages are inaccurate and totally misleading. The notation that there is an average of 3.5 vehicles per incident in Pinellas County is completely FALSE. There is NO data to support this claim. It is not the accuracy of the Data, but inaccurate analysis, partly due to a lack of understanding of our system. On page 2-11 "For 2004, there were more than 522,000 responses or runs by fire department or ambulance (Sunstar) vehicles in 2004." Again after careful and accurate analysis of the data, it is clear that in reality there were 213,659 responses by FD response units and 135,668 Sunstar vehicles response. Therefore, a total of 349,327 vehicles responded to the 152,882 incidents for an average of 2.3 total vehicles for all calls.*

*Exhibit 2-3 would lead the reader to believe that in December, an average of 3.5 vehicles responded to the incidents. In reality, 1.46 was the average unit response, for fire department vehicles, which is consistent with the data for the entire year as was shown earlier in this report.*

*Exhibit 2-3 indicates there were 12,337 incidents in the month which had 42,885 responses (vehicles responding to the incidents). That means, on average, 3.5 vehicles responded to each incident. The sample date shows that, on average, there are 3 vehicles on most fire incidents and between 2 and 3 on medical runs. The number of incidents is not correct as there were 12,341 incidents in December. First, if all the incidents listed in Exhibit 2-3 are totaled, the number is 12,336, as opposed to 12,337, which means the MGT Study is not correct. The number of vehicles responding is also incorrect. Each time a vehicle responds to an emergency, the 911 computer system creates a TSTATS for that vehicle. The 911 computer system can validate that there were 38,596 vehicles assigned to different emergencies. Further review of the number of vehicles assigned to emergencies shows that 47 percent of the vehicles were administrative pagers or staff units. Examples of administrative pagers and staff units*

would be; ambulances 10,839, Police units 3,480, Progress Energy 210, and Gas Co. 10, etc.

*Exhibit 2-4 reports the total number of alarms by station. While it is agreed that there were 152,888 total alarms in the county, this graphic is misleading. The graphic only shows the number of incidents in a station's response area. It does not show the actual number of calls that a unit in that station responded to. In addition, the columns do not equal the confirmed total in 2004 of 152,882 incidents.*

Page 2-11 - There were a total of 152,882 incidents in 2004, of which 125,966 (82.4%) were medical-related and 26,916 (17.6%) were fire-related. For 2004, there were more than 522,000 responses or runs by fire department or ambulance (Sunstar) vehicles in 2004. *Both of the numbers in this paragraph are not correct. By adding the numbers on Exhibit 1-5 there were 125,940 medical incidents and 26,942 fire incidents. This information can be validated by information in the 911 computer. The 911 computer system can validate that there were 470,489 vehicles assigned to different emergencies. Further review of the number of vehicles assigned to emergencies shows that 45 percent of the vehicles were administrative pagers or staff units. For the 2004 totals, the emergency vehicles are fire engines, rescue trucks, ladder trucks, squad trucks, pumpers, and water units. In 2004 the fire service sent 213,649 emergency units to 152,882 incidents which means on average 1.40 vehicles responded to each incident. The average number of vehicles on medical incidents was 1.27 and the average number of vehicles on fire emergencies was 2.02. Many times units are canceled while responding to an emergency. When totaling the number of fire engines, rescue trucks, ladder trucks, squad trucks, pumpers, and water units that actually showed up at the emergency scene the numbers will change. Of the 213,649 units that were dispatched, 181,039 actually showed up at the emergency scene which means that, an average, 1.18 vehicles responded to each incident. The average number of vehicles on medical incidents was 1.13 and the average number of vehicles on fire emergencies was 1.46.*

*In December the fire service sent 18,043 emergency units to 12,341 incidents, which means, an average of 1.46 vehicles responded to each incident. The average number of vehicles on medical incidents was 1.27 and the average number of vehicles on fire emergencies was 2.42.*

**RECOMMENDATION: Due to these serious errors, THIS ENTIRE SECTION SHOULD BE REMOVED FROM THE FINAL DOCUMENT BECAUSE IT IS FALSE AND MISLEADING AND MAY LEAD A READER TO MAKE DECISIONS BASED ON TOTALLY INACCURATE INFORMATION.**

Engines, Rescues, Trucks, Squads, Pumpers, and Water Units For 2004							
2004 TSTATS							
				Dispatched	Dispatched	Arrived	Arrived
Page 2-11 of the MGT Study		MGT	DSTATS	E,R,S,T,P,W	Average	E,R,S,T,P,W	Average
	Fire / Medical	Total Calls	Total Calls	Total Units	Units Per Call	Total Units	Units Per Call
Air Transport Incident	M	259	259	867	3.35	782	3.02
Alert One	F	3	3	0	0.00	0	0.00
Alert Two	F	30	30	50	1.67	29	0.97
Alert Three	F	3	3	13	4.33	4	1.33
Auto Crash	M	15,851	15,851	33,352	2.10	26,446	1.67
Automatic Fire Alarm	F	7,253	7,253	18,158	2.50	11,061	1.53
Bridge Alert	M	55	55	92	1.67	62	1.13
Brush Fire	F	83	83	162	1.95	144	1.73
Bomb Scare	F	71	71	11	0.15	10	0.14
Fire Unit Needs Police Help	F	13	13	17	1.31	8	0.62
Extrication	M	80	80	345	4.31	238	2.98
Fire Alarm Storm	F	719	719	0	0.00	0	0.00
Hazardous Materials	F	8	8	41	5.13	38	4.75
Hazardous Invest	F	44	44	45	1.02	42	0.95
Hospital Landing Zone	F	108	108	122	1.13	111	1.03
Hot Pit Refuel	F	7	7	0	0.00	0	0.00
Medical	M	108,566	108,566	121,734	1.12	111,745	1.03
Move up	F	842	842	842	1.00	842	1.00
Non Emergency Evacuation	F	284	284	0	0.00	0	0.00
Public Assist Call Disp.	F	108	108	81	0.75	22	0.20
Public Assist Call Comm.	F	32	32	22	0.69	16	0.50
Single Engine	F	9,064	9,064	10,125	1.12	9,174	1.01
Special	F	1,264	1,264	267	0.21	223	0.18
Star1 Swat Call	M	7	7	0	0.00	0	0.00
Storm Structure Damage	F	266	266	1	0.00	1	0.00
Structure Response	F	3,447	3,447	21,263	6.17	15,203	4.41
Swat Alert	M	6	6	2	0.33	2	0.33
Swat Callout	M	62	62	13	0.21	10	0.16
Technical Rescue	M	5	5	23	4.60	11	2.20
Transformer/pole fire	F	771	771	3	0.00	3	0.00
Trauma Alert	M	802	802	2,239	2.79	2,008	2.50
Tree Fire	F	505	505	0	0.00	0	0.00
Unconfirmed Structure	F	698	698	3,090	4.43	2,305	3.30
Water Rescue	M	247	247	668	2.70	499	2.02
Wires Down	F	1,319	1,319	1	0.00	0	0.00
		152,882	152,882	213,649	1.40	181,039	1.18

Page 2-16 to 2-18 – *The exhibits shown and described in the text of these three pages describes the number of hours, on average per day that the units in a station are on fire or EMS incidents. This figure is used as a key factor in making a recommendation on the continued viability of stations that are on fire/EMS incidents less than two hours a day. One flaw in this data is that using the involved time does not accurately represent the total time needed to respond to, operate at, and return from an incident, nor does it consider the need for equipment restocking, cleaning and report writing associated with each call. This will be further discussed below.*

Page 2 -19 *The twenty stations that have less than two hours of activity per day deserve an in-depth review as to their continued viability, taking into account location, service area, population, response times, etc. It is unclear as to how the consultant arrived at the cut off of two hours per day. Is this based on a national standard or an accepted practice? Further, the two hour, or less, of time on EMS or Fire incidents does not represent what firefighters do. For starters, as noted above, the time spent involved in an incident does not represent the time actually committed to an incident (see above). Further, how much of the day is spent in training, vehicle and equipment maintenance, fire prevention and code enforcement, public fire and life safety education, CPR programs, emergency management, and other community related activities. This is precisely why the PCFCA had asked that they be included. As noted elsewhere in this document, brief paragraphs of commendation or simple surveys that do nothing except report who does what, does nothing to quantify what the fire/EMS service does.*

*As stated, the locations of fire stations are often based on geographic locations, service area, and population, with consideration for future changes. Using time as an indicator for a station closure is simply not good public policy. The report does nothing to quantify any of these other factors.*

*Who is going to complete the in-depth study described and should this information be available before any recommendation is made to the citizens. Response time is a very important factor when deciding which fire station to close. What will be the new response time in the affected area? Will the citizens in the affected area accept a longer response time? MGT has not provided one hard statistical fact that indicates that any fire station should be closed. The big dollar saving in the MGT study assumes that fire stations will be closed. How can anyone propose a new single fire district without having this information at hand? This information is needed before any decision can be made because there might NOT be any savings.*

**RECOMMENDATION: THIS ENTIRE SECTION SHOULD BE REMOVED FROM THE FINAL DOCUMENT BECAUSE IT IS FALSE AND MISLEADING AND MAY LEAD A READER TO MAKE DECISIONS BASED ON TOTALLY INACCURATE INFORMATION. FURTHER, NO DISCUSSION OR ACTION ON THE CLOSING OR RELOCATION OF ANY STATION, COMPANY, OR PERSONNEL SHOULD BE MADE UNTIL A COMPLETE IN-DEPTH REVIEW OF THE CURRENT LEVEL OF SERVICE IS UNDERTAKEN, AND THE MINIMUM EXPECTED LEVEL OF SERVICE DEFINED.**

Page # 2-22 - *Depending on the organizational structure of the new single fire district, it is likely that economies of scale would reduce the number of current supervisory positions and ...." What would be the organizational structure of the new single fire district look like? There has to be other fire departments out there with 63 fire stations to look at. Again this information is needed before any decision can be made because there might NOT be any savings.*

Page # 2-22 - *Should the County form a single fire district, one of the functions that could have more centralization would be Code Enforcement.*

- *How many inspectors are there in the County today?*
- *How many buildings are inspected each year?*
- *What is the workload of the current inspectors?*
- *How many inspectors are needed in other fire districts that have the same population and number of buildings?*

Page 2-22 - Should the County form a single fire district, training is one of the functions that could become centralized with the possibility of combining training activities rather than replicating them 20 times,...

- *How many training officers are there?*
- *What is the workload of the current training officers?*
- *How many training officers are needed in other fire districts that have the same number of fire stations and employees as Pinellas County?*

*There are a number of training programs that are delivered countywide. Because of the shift schedules and need to send personnel to the training, replication of the same class is unavoidable, whether you are one fire department or 100. It must also be considered that some fire training is based on local hazards and specialized equipment and therefore only applicable to one or two departments. It would not make any sense to train the entire county on a marine unit that only 5 departments operate*

Page # 2-23 - In the previous chapter, Exhibit 1-7 identifies the receiver/sender status of the fire departments of the 20 fire departments/districts in Pinellas County in supporting the mutual aid agreement. Through the mutual aid agreement, the 20 fire departments attempt to operate as a single fire district. However, individual jurisdictions control and fund their fire departments. The jurisdictions dictate, for the most part, where fire stations are located. As the display in the previous chapter indicates, three fire departments, Clearwater, Largo, and St. Petersburg, each respond to more than 3,000 incidents in other jurisdictions, 3,693; 3,058; and 3,765 respectively. Pinellas Suncoast also responds to more than 3,000 incidents in other jurisdictions, but it has more than 3,300 responses from other fire departments coming into its area of responsibility (specifically 344 more received than sent). Other large receivers include Safety Harbor, Dunedin, and Lealman, with received over sent responses of 896, 787, and 527 respectively. *As noted previously in this document, the spreadsheet from which these conclusions were reached was mislabeled and backwards. Therefore, the findings above are, in reality opposite of that which is true.*

Page # 2-24 - Exhibit 2-8, displays the potential cost savings associated with the closure and/or combining of fire stations and the reduction in the number of supervisory and/or administrative positions under different scenarios. The exhibit highlights two Modification Scenarios. The first Modification Scenario contains the closing of 3 stations, combining of 8 stations, and the reduction of 15 supervisory personnel. Modification Scenario 2 contains the closing of 8 stations, combining of 3 stations and the reduction of 25 supervisory personnel. The potential cost savings for the Modification Scenarios is \$14.4 million and \$19.9 million, respectively. *This is again one of the most misleading sections of the report. The "potential" cost saving is not substantiated by anything. The stations to be closed are not identified, nor are the decreases in supervisory positions. There is no substantive data on how these cuts would equal the 14.4 or 19.9 million dollar savings. There is no data to support these changes nor is any information given on how it would affect service delivery.*

**RECOMMENDATION: THIS ENTIRE SECTION SHOULD BE REMOVED FROM THE FINAL DOCUMENT BECAUSE IT LACKS ANY SUBSTANTIVE EVIDENCE AND COULD LEAD A READER TO MAKE DECISIONS BASED ON INFORMATION THAT IS NOT VERIFIED. FURTHER, NO DISCUSSION OR ACTION ON THE CLOSING OR RELOCATION OF ANY STATION, COMPANY, OR PERSONNEL SHOULD BE MADE UNTIL A COMPLETE IN-DEPTH REVIEW OF THE CURRENT LEVEL OF SERVICE IS UNDERTAKEN, AND THE MINIMUM EXPECTED LEVEL OF SERVICE DEFINED.**

Page # 2-25 - *The ISO study in 1990 was requested by Pinellas County with the idea of having one rating for the entire county. The end result was a score of 68.66 which gave the County a rating of 4. If the County had accepted that rating those areas with a 2 or 3 rating would have lost their rating. With a single fire district in the County, it is very possible that a single ISO rating would occur and there could be losers and winners.*

Page #2-26 - *Pinellas County decided in 1983 that the system would be an all ALS first responder and that the transport system would also be ALS. The citizens now expect this level of service as the standard of care.*

Page # 2-30 - Recognizing that a priority dispatch concept might be of value to the Pinellas County's fire and transport services to ensure the best utilization of personnel and equipment, the consultant team spoke with jurisdictions where this methodology has been applied for several years. The team obtained the names of key representatives for numerous jurisdictions that are currently using some form of priority dispatch. The team also reviewed the Web site for these and other entries to determine size and capabilities. The team spoke with representatives in six jurisdictions:

- Charlotte/Mecklenburg County, North Carolina;
- Richmond, Virginia;
- Tulsa, Oklahoma;
- Oklahoma City, Oklahoma;
- Reno/Washoe County, Nevada; and
- Little Rock, Arkansas.

*A description of these six jurisdictions is presented below. As noted elsewhere in this paper, the selection of these agencies is not consistent with benchmarking with comparable service providers. These jurisdictions do not respond to as many incidents, and all but one are BLS only. The one that does provide ALS from First Responders only does so on 50% of the units.*

Department	Population	Sq Miles	Population Density	Level of EMS provided by FD	EMS Transport By	Annual # of EMS Incidents
Richmond, Virginia	197000	62.5	3152.00	BLS - NON	Authority	30000
Tulsa, Oklahoma	396000	207	1913.04	BLS	U/K	U/K
Oklahoma City, Oklahoma	500000	621	805.15	50% ALS	EMSA	52000
Reno/Washoe County, Nevada	No Response					
Little Rock, Arkansas	183000	122	1500.00	BLS	Metro EMS	18000
Charlotte/Mecklenburg County, North Carolina	650000	542	1199.26	EMT/D	County EMS	75000

Page # 2-31 - MGT references Charlotte/Mecklenburg County in the study as a basis for implementing priority dispatch protocols. MGT references a representative of this agency had never heard of or received any complaints by citizens. The individual referenced both for his experience in Charlotte and Kansas City having used priority dispatch for 18 years without complaint. This was proven to be untrue in that in both 1999 and 2003 Kansas City's system (MAST) was reported in the newspaper for manipulating response times and failing to meet the response standard of eight minutes 90 percent of the time. Additionally, the City Auditor released information of a citizen's survey reflecting dissatisfaction with ambulance services response time which increased from 5 percent in 2000 to 12 percent in 2002.

Page #2-32 - The most important activity that increases survival is the speed at which first aid is given. Recognizing symptoms and being able to provide cardio-pulmonary resuscitation (CPR) within the first 4 minutes is the action that increases the chances of survival the most. *This is what we do and why the system is setup the way it is.*

Page # 2-32 – RECOMMENDATION. The Pinellas County Public Safety Answering Point (PSAP) should implement a priority dispatch system using symptom guidelines to evaluate 911 calls and provide victims with the most appropriate response. *Although the current system does provide for a level of priority dispatch, by reducing response modes to non-emergency, the PCFCA does support expanding this system. However, it may be more appropriate to dispatch the First Responder Unit and in some cases not dispatch the ambulance. This is supported by the following facts:*

1. *The FD First Responder Units are geographically stationed to provide a quick response to all areas of the County. Not sending these units that are already staffed and in place would not be good policy.*
2. *The ambulances are dynamically deployed meaning that generally they are further from the incident than the first responders. This results in longer response times and distances. The longer distances increase the risk to the public in terms of the possibility of a crash.*
3. *According to Exhibit 2-1 of the MGT report, in 2004 an ambulance was dispatched to 111,507 emergency calls, and 28,214 non-emergency calls for a total of 139,721 incidents. However, only 110,680 patients were transported. This means that on 29,041 incidents no transport occurred.*
4. *After research, it could be determined which type of calls generally contributed to the 29,041 calls that did not result in a transport. In these cases, the dispatcher could dispatch only a FD first responder unit which could, if necessary, request an ambulance after patient contact.*

*Page #2-34 - This should not be construed to mean that there is not a sense of emergency in all other calls since the sooner patients can receive treatment the sooner pain can be relieved, anxiety will subside, and there will be less likelihood of exacerbated illness or injury due to well meaning but improper handling of the patient. This is why the fire service responds to all emergency calls with an ALS crew.*

*Page #2-38 - MGT references the OPALS Study as a basis for promoting defibrillation in lieu of advanced life support protocols. The OPALS study was commissioned and received unlimited funding from Medtronic Corporation, the largest manufacturer of automatic external defibrillators. The study was based upon an area in Ontario where fire departments were provided semi-automatic defibrillators. The level of skills and intervention procedures for both BLS and ALS personnel were limited and were not advanced to the level of Pinellas County's EMS system. The OPALS study was the impetus for implementing advanced paramedic skills for that community, not a reduction to BLS levels. In July 1994, the Ontario Ministry of Health committed \$15 million over five years to training, equipment and salary support required for the operational component to study the 20 communities. At this time, services to the community were minimal. It wasn't until the third phase of OPAL that 50 percent of the paramedics were trained to provide advanced skills including endotracheal intubation and IV administration of drugs, Pinellas County's standard of paramedic care.*

*Page # 2-39 – MGT, in another study "ALS Does Not benefit Trauma Patient Survival, OPAL" this study states ALS care has no benefit over BLS. The study shows ALS on the scene longer compared to BLS. Basic Trauma Life Support teaches this fact. No trauma patients are ever saved on the scene. Definitive care is only delivered on the operating table. The golden one-hour-rule from time of accident to operating table is taught in the first day of paramedic school. BLS care is the care of standard for any ALS unit treating a trauma patient. Pinellas County EMS protocols require all trauma patients to be load-go once transport arrives. Any procedures beyond BLS care are done en route to the trauma center. BLS care and transport are only delayed by patients trapped in a vehicles, no transport unit available or life threatening injuries requiring advance paramedic skills (i.e needle decompression, or airway obstruction). In Pinellas County, on the average, patients who met Trauma Alert Criteria and were transported by ground resources, reached the Trauma Center (Bayfront) in 36 minutes from the estimated time of injury. This excludes prolonged extrication and staging situations. Trauma patients delivered to Bayfront Medical Center, our main Trauma Center, arrived there before the conclusion of the Golden Hour 94% of the time. During the OPAL study period, Canadian paramedics were not trained to provide critical skills such as chest needle decompress. Transportation of trauma patients requires rapid packaging on a long backboard, cervical collars and BLS care.*

Page #2-39 - MGT references Dr. Wang's article in *Critical Care Medicine* regarding endotracheal intubation in a safe manner by out-of hospital rescuers, inferring that "39.2 percent did not perform an EIS during the evaluation year and concluded that out-of-hospital ETI, an important and difficult resuscitation intervention, is an uncommon event for most rescuers." Had MGT inquired with the Pinellas County Office of the Medical Director, they would have found that the County's success rate for this medical procedure was 100 percent in 2004, resulting in 1,177 endotracheal intubations.

Page # 2-41 – Four possible scenarios are provided to support the recommendation stated on page 2-40 regarding the delivery of ALS First Responders services. Two of these recommendations # 2 and # 3 discuss service delivery from a vehicle with one paramedic or EMT. This would clearly be a service reduction from the current level of service and may not be in compliance with State Laws regarding EMS. The last suggestion is to add additional ambulances, or some other vehicle, to increase response to times. However, it is presumed that the author means to reduce response times. This is not a good alternative as the FD paramedics and EMTs serve a dual role. It would make no sense to take funding from the dual-role providers and give it to the ambulance company to add personnel to perform a single role. The fire service would have to make up the lost revenue in order to maintain minimum levels of fire service protection, thereby increasing the cost of the whole system.

No consideration was given to the efficiencies created using role firefighter/paramedics and EMT as the transport provider. In the overwhelming majority of urban and suburban areas of Florida this is the model used. Firefighters staff transport units, but also, part of the complement of firefighters can be used for fires, and the multitude of other services delivered by the fire departments. This option was never studied nor discussed in this report. This very subject was one that the American Assembly process brought forth and was agreed upon by Pinellas County and the Council of Mayors.

## REPORT APPENDICES

The report appendices were prepared by Pinellas County EMS/Fire staff. The included the subjects that were removed from the original suggested study parameters. These areas included Public Fire Education, Public Information, Water Supply/Hydrants, Future Roadway planning and Fire investigations. These appendices and study have produced little more than a summary of who does what. It lacks any research and the data is not considered in any of the conclusions. The purpose of these being included in the original study parameters was to use the data as part of the research when examining effectiveness, productivity, and efficiency's. For example, the closing of several stations is recommended because solely on the hours "busy" with fire and EMS incidents. The purpose in including the public education component was to examine what hours fire companies are used for this important function. The survey and reporting of just an aggregate number means nothing to the findings in the report. This is yet another failure in the study methodology.

## VERBAL STATEMENTS

*There were a number of verbal statements made during the presentation of the reports at various CRC meetings. Some of the statements which were made lack backup data, and appear to be the opinion of the MGT staff. This is further cause for concern if this information is going to be used to make decisions. The following excerpts from the CRC log.*

Meeting Date September 19, 2005

Coats	re on-demand staffing. Will that provide for civil disturbances, natural disasters,
Humphrey	On demand is standard operations not crisis.
Coats	How do you muster resources
Humphrey	Like New Orleans - bring in everybody else
Coats	Don't know if that's satisfactory in this community
Humphrey	If hurricane here --
Coats	Major fire
Humphrey	These people quite capable of handling - they are good - will come together
Coats	Even with on-demand concept
Humphrey	Oh, yes. Historically have done.

*Sheriff Coats brings up an excellent point. In public safety, sometimes deployment decisions are based on what could happen. For example, during the summer thunderstorms that occur almost everyday, Existing Pinellas County resources are stretched to the limit. Mr. Humphrey's comments in the above are pure opinion. He offers nothing to substantiate that on-demand staffing would not result in less service to the Community.*

Harrell	Apologize late I read report. Two ques. Is there any question about quality of svc or just talking cost
Humphrey	No, saying will be as effective either way.
Harrell	Really talking about cost. (Yes) Want to make sure not talking about quality.
Humphrey	Great depts. Not an issue. Want to maintain.

*Comments regarding the quality of service are opinions. How can it be said that service will be equally effective either way when there is no reference to service levels currently or proposed.*

Meeting Date October 11, 2005

Humphrey	As we said in our initial discussion on consolidation, we think it is possible to have fewer stations, county consolidation. We have 20 stations that do less than 2 hours worth of run time in a 24-hour period. If we go to priority dispatch, that drops number to 1.2 and frankly if we took and dug into this chart, we find an awful lot of runs are being made into some of the best fire areas and while I agree with concept of automatic aid, I have a feeling that there is not a fair number of them that really should remain. It's quite, we don't have anything to do, so let's go answer the call. I hate to say it but I think there is still some truth to it.
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*This is an **outrageous statement** that requires either substantiation or be stricken from the record.*

## WHAT'S ELSE IS NOT IN THE REPORT

- No reference to current or proposed staffing in relation to safe and effective medical, rescue, and/or fire operations.
- No reference to current departments that have or are seeking Fire Service Accreditation
- No "vision" as to the effects of the recommendations in the future. Considering an aging population and aging buildings.
- No reference to fire service role in Emergency Management.
- No reference to the effectiveness and efficiencies created by using countywide specialized response teams.
- No reference to our expanded role post 911 regarding acts of terrorism, including both domestic and international.
- No reference to current ISO ratings and the impact on insurance costs.
- No reference to the County wide basic fire flow capabilities.
- No evaluation of the radio communications ability to operate after a catastrophic event such as the hurricanes in La. and adjacent states and the attack on NYC (the Fire Department is aware that communications are likely to fail).
- No reference to aircraft, marine, or rail disaster firefighting and rescue capabilities.
- No reference to our capabilities and obligations to staff emergency shelters.
- No reference to firefighters being trained paramedics and serving as dual role personnel (proven highly cost effective-one person doing 2 jobs)
- No reference to which fire stations have been hardened and can expect to survive a moderate to major hurricane and which stations need to be hardened.
- No reference to a fire department's obligation to continue to train the County citizens in the nationally recognized C.E.R.T. program to improve survival rates for victims of natural and man made disasters.
- No reference to pre-fire planning.
- No reference to major disaster drill training.
- No evaluation of State laws and codes to see if they are stringent enough for local needs i.e. sprinklers
- No reference to a long term staffing plan.
- No reference to a long term Capital Improvement Plan.
- No reference to the existing EMS laws, and how and why they got passed, and no reference to these laws and legislative action which would be required for any implementation.
- No reference to all the capital items owned by the municipalities and independent districts, what they are worth and how would the County reimburse the districts for their long term investments (estimated to be many millions of local taxpayer dollars)
- No evaluation of our ability to handle high rise fires, which is a recognized risk. Needs more than 100 firefighters on a first alarm to handle a minor working fire.
- No evaluation of our ability to handle a large flammable liquid fire and if we have the capabilities to apply large volumes of foam.

## **SUMMARY**

In summary, like the 1992 report, this report lacks completeness, contains inaccurate analysis of data, and provides a non-substantiated conclusion. Many of the recommendations and conclusions are based on opinion, in fact, the author and presenter of the document uses the words; possible, likely, potentially, and I think in the context of his opinion frequently. Opinions are hardly a basis for making decisions on the future of public safety delivery in this county. This report should not be accepted as the text could, in the future, lead a reader to believe that some of the recommendations are possible. As this document has pointed out, this could be no further from the truth. If the MGT report is accepted by the CRC into record, this report should be attached to it to allow for the flaws to be recognized.