

**ORDINANCE NO. 1439-2024**

**AN ORDINANCE AMENDING CHAPTER 6 “HEALTH AND SANITATION” SPECIFICALLY IN ARTICLE 6.07 “EMERGENCY MEDICAL SERVICES” OF THE RIVER OAKS CODE OF ORDINANCES (2020), AS AMENDED, BY REPEALING SECTION 6.07.001 “STATUTORY AUTHORITY”; SECTION 6.07.002 “GENERAL PURPOSES AND INTENT”; SECTION 6.07.003 “DEFINITIONS”; SECTION 6.07.004 “EMERGENCY PHYSICIANS ADVISORY BOARD”; SECTION 6.07.005 “METROPOLITAN AREA EMS AUTHORITY”; SECTION 6.07.006 “ FIRST RESPONDER ADVISORY BOARD”; SECTION 6.07.007 “VIOLATIONS”; SECTION 6.07.008 “PENALTIES”; AND SECTION 6.07.009 “ TRAFFIC LAWS; EXEMPTION” AND ENACTING NEW SECTIONS 6.07.001 “STATUTORY AUTHORITY”; SECTION 6.07.002 “GENERAL PURPOSES AND INTENT OF ORDINANCE”; SECTION 6.07.003 “DEFINITIONS”; SECTION 6.07.004 “FORT WORTH EMS SYSTEM AND INTERFACILITY TRANSPORTATION”; SECTION 6.07.005 “VIOLATIONS”; SECTION 6.07.006 “PENALTIES” AND SECTION 6.07.007 “TRAFFIC LAW EXEMPTION”; PROVIDING THAT THIS ORDINANCE SHALL BE CUMULATIVE OF ALL PRIOR ORDINANCES AND REPEAL CONFLICTING ORDINANCES; PROVIDING FOR A SEVERABILITY CLAUSE; PROVIDING FOR A SAVINGS CLAUSE; PROVIDING A PENALTY CLAUSE; PROVIDING FOR PUBLICATION IN THE OFFICIAL NEWSPAPER OF THE CITY; AND PROVIDING AN EFFECTIVE DATE.**

**WHEREAS**, the City Council of the City of River Oaks("City Council") seeks to protect the public safety, preserve the quality of life, and promote efficiency within the City of River Oaks (the “City”);

**WHEREAS**, it is in the best interests of the public health and welfare of the people of the City to have available to them a regulated system for the provision of out of hospital emergency and non-emergency medical services, unscheduled medical transportation and ambulance service mobile integrated healthcare (“MIH”)(collectively the “EMS System”) and scheduled interfacility medical transportation services among and between hospitals and other medical facilities in non-emergency situations (“interfacility transports or IFT”) with the intent of providing quality clinical care with performance measures and standards and a goal of facilitating the best possible outcomes for each patient;

**WHEREAS**, in 1988 through the adoption of a Uniform EMS Ordinance and Interlocal Cooperative Agreement between local governments, including the City of Fort Worth (“Fort Worth”), the Area Metropolitan Ambulance Authority (the “Authority” a/k/a “MedStar”) was

created as a governmental administrative agency to administer and operate an EMS System and exclusively provide interfacility transports in a service area comprised of the member jurisdictions, with Fort Worth constituting more than eighty-five percent of the land mass and call volume of the Authority;

**WHEREAS**, the Authority has sustained rising operational and capital costs and flat net revenues, leading to a dynamic that requires future public funding to ensure the long-term sustainability of those services;

**WHEREAS**, the Fort Worth City Council has elected to establish an EMS division through the Fort Worth Fire Department to operate an EMS System and provide services to the people within its jurisdiction and people in other jurisdictions, provided each such jurisdiction adopts this Uniform EMS Ordinance and enters into an EMS Interlocal Agreement with Fort Worth (each a “Client City”);

**WHEREAS**, Fort Worth is engaging a physician who is licensed in Texas and board certified in emergency medicine to serve as the Chief Medical Officer and Medical Director for the EMS System (the “Medical Director”);

**WHEREAS**, the member jurisdictions of the Authority have agreed to dissolve the Authority, and with those adopting this ordinance and executing an EMS Interlocal Agreement opting to become Client Cities;

**WHEREAS**, due to the relatively low population and low population density of some areas at issue and the extremely high, start-up and fixed operating costs of a state-of-the-art EMS System, it is necessary to designate Fort Worth as the exclusively contracted EMS Provider of EMS System services within the City in order to maximize clinical proficiency, enhance operational effectiveness, and maximize economies of scale for providing such services;

**WHEREAS**, although Fort Worth will not be assuming the Authority’s role as exclusive provider of interfacility transports, there remains a need to ensure such transports within the City are only conducted by properly qualified and authorized providers in order to ensure clinical standards are met and public safety is preserved; and

**WHEREAS**, the City Council finds this Ordinance to be reasonable and necessary.

**NOW, THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF RIVER OAKS, TEXAS, THAT:**

**SECTION 1.**

Chapter 6 “Health and Sanitation” specifically in Article 6.07 “Emergency Medical Services” of the Code of the City of River Oaks is hereby amended by repealing Section 6.07.001 “Statutory Authority”; Section 6.07.002 “General purposes and intent”; Section 6.07.003 “Definitions”; Section 6.07.004 “Emergency physicians advisory board”; Section 6.07.005 “Metropolitan area EMS authority”; Section 6.07.006 “ First responder advisory board”; Section 6.07.007 “Violations”; Section 6.07.008 “Penalties”; and Section 6.07.009 “ Traffic laws; exemption” by enacting new Sections 6.07.001 “Statutory Authority”; 6.07.002 “General purposes and intent of Ordinance”; Section 6.07.003 “Definitions”; Section 6.07.004 “ Fort Worth EMS System and Interfacility Transportation”; Section 6.07.005 “Violations”; Section 6.07.006 “Penalties”; and Section 6.07.007 “Traffic Law Exemption”; the text of which shall read as follows:

**“SECTION 6.07.001: STATUTORY AUTHORITY**

This Section is enacted by the City pursuant to Tex. Health and Safety Code § 773.051, which provides that local governments may establish standards for ambulances, and pursuant to Tex. Government Code Chapter 791, which authorizes combinations of local governmental units to contract for the provision of governmental services.

**SECTION 6.07.002 “GENERAL PURPOSES AND INTENT OF ORDINANCE”**

It is the purpose of this Ordinance:

- (1) To establish a regulated out-of-hospital emergency medical services, non-emergency medical services, unscheduled medical transportation and ambulance service, and mobile integrated healthcare system (collectively the “EMS System”) which can provide quality clinical care with performance measures and standards, with the goal of facilitating the best possible outcomes for each Patient.
- (2) To designate Fort Worth as the EMS Provider of the EMS System within the corporate limits of City as provided by the terms of the EMS Interlocal Agreement between Fort Worth and the City to maintain consistent, high-quality service while controlling costs through efficiencies and economies of scale.

**SECTION 6.07.003 “DEFINITIONS”**

For the purposes of this Ordinance, the following words and phrases shall have the meanings respectively ascribed to them by this section:

- (a) **Advanced Life Support (ALS).** Out-of-hospital care that uses invasive medical acts (as defined in Tex. Health and Safety Code § 773.003(1)).
- (b) **Aeromedical Transportation Unit.** Any rotary or fixed wing aircraft providing basic or advanced life support services and patient transportation that originates within the Service Area.

- (c) **Ambulance.** A vehicle for transportation of sick or injured person to, from, or between places of treatment for an illness or injury, and provide out of hospital medical care to the Patient.
- (d) **Ambulance Mutual Aid Agreement.** A written contract between Fort Worth and one or more entities whereby the signing parties agree to provide backup ambulance service to one another under the terms and conditions specified therein.
- (e) **Ambulance Service.** The transportation of Patients by emergency or non-emergency ambulance; for purposes of this Ordinance, Ambulance Service does not include IFT services as defined herein.
- (f) **Associate Medical Director.** A licensed physician who assists the Medical Director in carrying out his or her duties under this Ordinance, Fort Worth’s EMS Interlocal Agreements, and the Medical Director’s agreement with Fort Worth.
- (g) **Basic Life Support (BLS).** Out-of-hospital care that uses noninvasive medical acts (as defined in § 773.003(2), Tex. Health and Safety Code).
- (h) **Emergency Care Attendant (ECA).** A person certified as an “emergency care attendant” under § 773.046 of the Tex. Health and Safety Code.
- (i) **Emergency Medical Services (EMS).** Services used to respond to an individual’s perceived need for immediate medical care and to prevent death or aggravation of physiological or psychological illness or injury.
- (j) **Emergency Medical Technician (EMT).** A person certified as an “emergency medical technician” under § 773.047 or an “advanced emergency medical technician” under § 773.048 of the Tex. Health and Safety Code, and any other class of EMT recognized by state law or regulation.
- (k) **EMS Communications Center.** The facility designated by Fort Worth as the central communications center from which all EMS System services offered by Fort Worth shall be dispatched and coordinated.
- (l) **EMS Interlocal Agreements.** The service level interlocal agreements executed by Fort Worth and Client Cities to designate Fort Worth as the exclusively contracted EMS Provider of the EMS System within the Service Area.
- (m) **EMS Provider.** The entity that has received a Texas EMS Provider License, as required by relevant state law, to provide the EMS System services and is the exclusively contracted provider of the EMS System services within the Service Area. For purposes of this ordinance, the EMS Provider is Fort Worth.
- (n) **EMS System.** The regulated out-of-hospital EMS, non-emergency medical services, unscheduled medical transportation and ambulance services, and mobile integrated healthcare system provided by Fort Worth within the Service Area, not including those first response services City chooses to provide itself as a First Responder.
- (o) **First Responder.** Any agency that, in cooperation with the EMS Provider, provides initial response to requests for EMS and, on its own or in cooperation

with the EMS Provider, provides immediate on-scene care to ill or injured persons but does not transport those persons to healthcare facilities.

- (p) **FW EMS.** The emergency medical services division of the City of Fort Worth Fire Department responsible for providing the EMS System services.
- (q) **Interfacility Transportation (IFT).** The provision of scheduled, or by appointment, medical transportation services by a person or entity between hospitals or medical facilities originating within the Service Area.
- (r) **Medical Director.** The licensed physician employed or contracted by Fort Worth who is responsible for carrying out his or her duties under their engagement with Fort Worth, this Ordinance, and Fort Worth's EMS Interlocal Agreements with Client Cities and for directing the Office of the Medical Director.
- (s) **Medical Transportation.** The transportation of Patients by ambulance, Specialized Mobile Intensive Care Unit, Specialty Care Transport, or Aeromedical Transportation Unit, including both emergency and low-acuity emergency transports, where such transportation originates within the Service Area.
- (t) **Mobile Integrated Healthcare (MIH).** Services provided by Fort Worth, as requested by City, that are designed to enhance, coordinate, effectively manage, and integrate out of hospital care, in order to improve outcomes, enhance the client's experience of care, and improve the efficiency and effectiveness of healthcare services provided to the enrolled clients.
- (u) **Office of Medical Director.** The department or division through which the Medical Director carries out his or her functions. The Office of the Medical Director is comprised of the Medical Director, any Associate Medical Director(s), and other individuals assigned to the Office to assist the Medical Director in carrying out the Medical Director's functions.
- (v) **Paramedic.** A person qualified as a certified or licensed "paramedic" as defined by Tex. Health and Safety Code Sections 773.049 and 773.0495.
- (w) **Patient.** A person: who requests EMS, or for whom EMS has been requested; and who has any medical or psychological complaint, obvious injury/distress, or has a significant mechanism of injury.
- (x) **Service Area.** That geographical area which is contained within the corporate limits of the City and other local jurisdictions who have elected to become Client Cities by entering into an EMS Interlocal Agreement with Fort Worth and adopting this ordinance.
- (y) **Specialty Care Transport.** The transportation of a critically injured or ill patient at a level of service beyond the scope of the EMT-Paramedic when the Patient's condition requires ongoing care that must be furnished by one or more health professionals in an appropriate specialty area; for example, emergency or critical care nursing, emergency medicine, respiratory care, cardiovascular care, or a paramedic with additional training.

(z) **Specialized Mobile Intensive Care Unit.** A vehicle which is specially constructed, equipped, staffed, and employed in the inter-facility transport of patients whose requirements for en route medical support are likely to exceed the clinical capabilities of an Advanced Life Support ambulance.

(aa) **Uniform EMS Ordinance.** This ordinance.

(bb) **Unscheduled Medical Transportation.** The transportation of Patients by ambulance service, Specialized Mobile Intensive Care Unit, Specialty Care Transport, or Aeromedical Transportation Unit, including both emergency and low-acuity emergency transports, where such transportation originates within the Service Area and is not previously scheduled or made by appointment.

**SECTION 6.07.004 “FORT WORTH EMS SYSTEM AND INTERFACILITY TRANSPORTATION”**

**(1) POWERS AND DUTIES OF FW EMS**

(a) Fort Worth, by and through FW EMS, is hereby designated as the exclusively contracted EMS Provider of the EMS System within the City's corporate limits as provided by the terms, conditions and provisions of the City's EMS Interlocal Agreement with Fort Worth and for so long as Fort Worth is a party to the City's EMS Interlocal Agreement.

(c) Fort Worth shall comply with all terms of the EMS Interlocal Agreement and have all the powers and duties enumerated therein.

**(2) INTERFACILITY TRANSPORTATION**

(a) This ordinance is not intended to designate Fort Worth as the sole provider of interfacility transportation services between hospitals and other medical facilities within the Service Area.

(b) Notwithstanding the above, any person or entity who wishes to provide such IFT services within the Service Area must be registered with Fort Worth as an IFT provider and permitted by Fort Worth and the Medical Director to provide such services.

(c) Any IFT provider who obtains a permit to provide IFT services from Fort Worth must comply with the provisions of this ordinance and the directives of the Medical Director.

**SECTION 6.07.005 “VIOLATIONS”**

(a) So long as Fort Worth is a party to the City's EMS Interlocal Agreement, it shall be unlawful:

(1) To knowingly give false information to induce the dispatch of an ambulance or Aeromedical Transportation Unit.

(2) To perform duties as an ECA, EMT, Paramedic or emergency ambulance dispatcher without current credentials issued by the Office of the Medical Director, unless participating in a training program

approved by Office of the Medical Director or performing duties as a First Responder of the City;

- (3) To permit a person to work as an ECA, EMT, Paramedic or emergency ambulance dispatcher without current credentials issued by the Office of the Medical Director, unless participating in a training program approved by Office of the Medical Director or performing duties as a First Responder of the City;
  - (4) To use, or cause to be used, any Ambulance Service other than FW EMS, except as permitted in subsection (b) below;
  - (5) For any person or entity other than Fort Worth and FW EMS to provide EMS System services within the Service Area, not including those first response services which City provides itself as a First Responder and except as permitted by subsection (b) below;
  - (6) For any person to provide Medical Transportation originating in the Service Area without a permit issued by Fort Worth;
  - (7) For any agency to provide First Responder services without a First Responder Agreement with Fort Worth or a written automatic aid or mutual aid agreement with the City;
  - (8) To use an ambulance for the transportation of persons other than in connection with the transportation of a Patient.
- (b) It shall be a defense to any alleged violation of this section that a vehicle is being used or service is provided solely in any of the following manners:
- (1) As a privately-owned vehicle not ordinarily used in the business of transporting persons who are sick, injured, wounded, incapacitated or helpless;
  - (2) Rendering service as an ambulance at the request of the EMS Communications Center upon the declaration of a disaster by Fort Worth, the City, another unit of local government, the State of Texas, or the United States; or a declaration of a major catastrophe or extreme system overload by the City Fire Chief, or the Fort Worth Fire Chief;
  - (3) Any ambulance owned or operated by the federal or state government;
  - (4) Ambulance mutual aid calls when rendered pursuant to an Ambulance Mutual Aid agreement approved by the City or Fort Worth;
  - (5) Wheelchair transport services for persons other than Patients, when the service is not provided by ambulance; and
  - (6) Medical Transportation of a Patient where the transport originates outside the Service Area.
  - (7) IFT between hospitals or medical facilities within the Service Area if the provider has first obtained a permit from Fort Worth.

**SECTION 6.07.006 “PENALTIES”**

- (a) Any person convicted of violating the provisions of Section 5-31 shall be guilty of a Class C misdemeanor and shall be punished by a fine not to exceed \$500 (Tex. Penal Code §12.23).
- (b) This Section does not serve to limit any other remedies available to the City in law or equity.
- (c) Each violation of this Ordinance shall constitute a separate offense.

**SECTION 6.07.007 “TRAFFIC LAWS; EXEMPTION”**

When the driver of an emergency medical response vehicle has reasonable grounds to believe that an emergency exists, as determined by the EMS Communication Center, the vehicle shall be treated as an “authorized emergency vehicle” within the meaning of Chapter 546 of the Tex. Transp. Code and shall be exempt from traffic laws as provided therein.

**§ 6.07.008 – 6.07.009 Reserved”**

**SECTION 2.**

This ordinance shall be cumulative of all provisions of ordinances of the Code of the City of River Oaks, Texas (2020), as amended, except where the provisions of this ordinance are in direct conflict with the provisions of such ordinances and such Code, in which event conflicting provisions of such ordinances and such Code are hereby repealed.

**SECTION 3.**

It is hereby declared to be the intention of the City Council that the phrases, clauses, sentences, paragraphs and sections of this ordinance are severable, and, if any phrase, clause, sentence, paragraph or section of this ordinance shall be declared unconstitutional by the valid judgment or decree of any court of competent jurisdiction, such unconstitutionality shall not affect any of the remaining phrases, clauses, sentences, paragraphs and sections of this ordinance, since the same would have been enacted by the City Council without the incorporation in this ordinance of any such unconstitutional phrase, clause, sentence, paragraph or section.

**SECTION 4.**

All rights and remedies of the City of River Oaks, Texas, are expressly saved as to any and all violations of the provisions of the Code of the City of River Oaks, or any other ordinances of the City, that have accrued at the time of the effective date of this ordinance; and, as to such accrued violations and all pending litigation, both civil and criminal, whether pending in court or not, under such ordinances, same shall not be affected by this ordinance, but may be prosecuted until final disposition by the courts.

**SECTION 5.**



Any person convicted of violating the provisions of the Code of the City of River Oaks Section 6.07 of Chapter 6 "Health and Sanitation" as enacted by this Ordinance shall be guilty of a Class C misdemeanor and shall be punished by a fine not to exceed \$500 (Tex. Penal Code §.12.23). This Section does not serve to limit any other remedies available to the Jurisdiction in law or equity. Each violation of this Ordinance shall constitute a separate offense.

**SECTION 6.**

The City Secretary of the City of River Oaks, Texas is hereby directed to publish the caption, penalty clause and effective date of this ordinance for two (2) days in the official newspaper of the City of River Oaks, Texas, as authorized by Texas Local Government Code, Section 52.013.

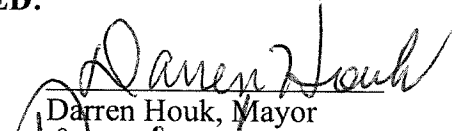
**SECTION 7.**

All other provisions of Chapter 6 of the Code of the City of River Oaks, as amended, shall remain in full force and effect, save and except as amended by this ordinance.

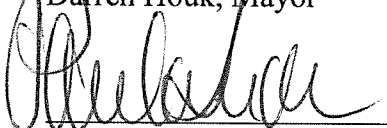
**SECTION 8.**

This ordinance shall take effect upon adoption and publication as required by law, and it is so ordained.

**APPROVED:**

  
Darren Houk, Mayor


**ATTEST:**

  
Paula Luck, City Secretary

**APPROVED AS TO FORM AND LEGALITY:**

  
City Attorney

**ATTEST:**

  
Paula Luck, City Secretary

Date: 9-17-2024

ADOPTED: 9-17-2024

EFFECTIVE: 7-1-2025

### **Exhibit B – Travel Time Calculation Worksheet**

Every 911 request for service involves a cascade of events from the onset of the incident until the ambulance and personnel are available for another request for service. The figure below is a visual representation of the cascade of events in a 911 incident.

The following Elements of Time are key performance indicators that are measured as part of overall EMS System performance.

**Call Processing Time** – The element of time that is measured from the time that 911 answers the call and receives adequate information to identify the call location and priority level (call back number, location, chief complaint, and MPDS determinant) to dispatch the call and the time the Emergency Dispatch Center dispatches an ambulance.

**Turnout Time** – The element of time that is measured from the time that the ambulance is notified of a call until the ambulance establishes a continuous state of travel (en-route) to the location of the emergency incident.

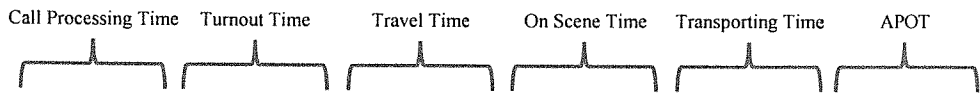
**Travel time** – The element of time that is measured from the time that the ambulance goes en route to the location of the emergency incident until the ambulance arrives at the location.

**On-Scene Time** – The element of time that is measured from the time that the ambulance arrives at the location of the emergency incident, designated staging location, or nearest public road access point to the scene to the time the ambulance clears the scene location or begins to transport.

**Transport time** – The element of time measured from the time that the ambulance begins transporting the patient from the scene to the time the ambulance arrives at the health care receiving facility.

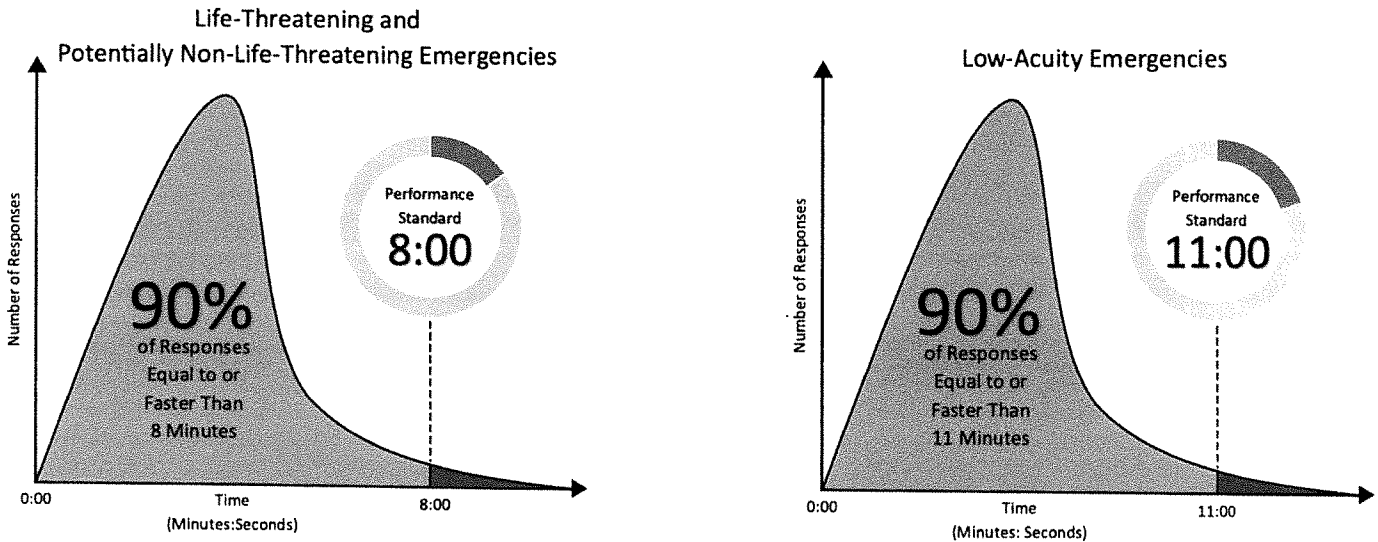
**Ambulance Patient Off-load Time (APOT)** – The element of time is measured from the time that the ambulance arrives at the health care receiving facility until the time it is available for another assignment.

The figure below visually represents each of the intervals where these elements of time are calculated.



CAD Incident #	Case Number	Unit	Call Received	Dispatched	Enroute	On Scene	Enroute to Hospital	Arrived at Hospital	Call Cleared
22000005	2-000019	M77	1/1/22 0:12:35	1/1/22 0:13:17	1/1/22 0:13:31	1/1/22 0:22:04	1/1/22 0:33:36	1/1/22 0:58:58	1/1/22 1:38:11

The figure below visually represents the travel time performance objectives for life-threatening, potentially non-life-threatening, and low-acuity emergencies.





## **Exhibit C – UHC and Payment Calculation Information**

1. Define the total number of consumed unit hours in the entire system.
2. Define the needed public funding for the system calculated as total revenues less total expenses. This residual value is the public funding needed.
3. Determine the residual consumed unit hour cost (UHC) by dividing the total needed public funding (Step 2) by the total consumed hours in the entire system (Step 1)
4. Determine the consumed unit hours by each jurisdiction.
5. Determine the cost allocation for each jurisdiction by multiplying the total consumed unit hours in the jurisdiction (Step 4) by the residual consumed unit hour cost (UHC) (Step 3).

For Client:

1. There have been 168,718 consumed unit hours in the EMS System inclusive of all participating agencies, as determined by the Fiscal Year 2024 MedStar CAD system data;
2. The needed residual public funding for the EMS System is \$17,363,565, determined as follows:
  - a. This number was determined by taking revenues (\$61,332,602) minus expenses (\$70,696,166), including dispatch and medical director's fees (\$8,000,000).
3. Accordingly, the UHC is \$102.91 ( $\$17,363,565 / 168,718$  consumed hours)
4. Client utilized 874-unit hours in its boundaries according to the Fiscal Year 2024 MedStar CAD system data;
5. The annual cost allocation for Client is \$89,943.34 (874-unit hours x \$102.91 UHC) to be paid in two semi-annual payments. For Fiscal Year 2025, Client will owe only one payment which has been prorated to \$18,139.00 and is due July 1, 2025.