

DRAFT
Broward Regional Emergency Medical Services (EMS) Council
March 12, 2026
1:37 p.m.
MINUTES

Call to Order

Dr. Frederick Keroff, Chair, called regular meeting to order at 1:35 pm.

Roll Call

Alison Zerbe called roll and quorum established.

Announcements

Approval of Minutes from December 4, 2025

MOTION TO ACCEPT the minutes of December 4, 2025

Motion made by: Chief Julie Downey

Seconded: Dr. Evan Boyar

Motion passed unanimously

Recommendations For Reappointments/Appointments

N/A

Approved Appointments by Commission (see March Agenda)

January 22, 2026

November 13, 2025

October 7, 2025

August 21, 2025

Items

Item #1 - Proposed Chapter 3½ Revisions

Item #2 – Proposed Need Determination

Item #1 – Proposed Chapter 3½ Revisions

MOTION TO APPROVE the recommendations to Chapter 3½ Ordinance proposed at the EMS Council workshops.

Motion made by: Dr. Evan Boyar

Seconded: Chief Julie Downey

Motion passed unanimously

Dr. Keroff said they will present the proposed Chapter 3½ revisions to the Broward County Commission. Alison Zerbe will updated EMS Council on the public hearing date.

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Item #2 – Proposed Need Determination

The County Commission and Administration want an objective measure to determine need for additional service.

EMS Council workshops open to other suggestions.

MODEL 1 – Unit hour utilization

Unit hour utilization (UHU)– the number of transports divided by the number of unit hours on the road. Key performance indicator used in the ambulance industry.

- UHU is also a suggestion from Fitz & Associates (a public service consultant for EMS Council). F&A has a suggested ratio and includes 911 in their studies of .30 to .50.
- Benchmarks from the Academy of International Mobile Health Integration show member agencies often fall between .22 to .476.

Middle ground between customer service and making a profit. The higher the UHU, customer service can fail and fatigue could set in.

Scenario: They did 120 transport divided by 40 unit hours. That's a .50 UHU. That means they were actively responding, transporting, or at destination 50 percent of the scheduled work time.

Broward County shows 121 licensed private ambulances with Consumer Protection. The 2025 total transport number was 66,490.

- If Broward County use all their ambulances 24 hours a day it would be a .60 UHU, meaning people would be sitting around being unproductive most of the day.
- If they were to use half of those ambulances 24 hours/day it would be a .12.
- 30 ambulances 24 hours/day it would be .25.
- 15 ambulances 24 hours/day it would be .50. They are into the zone where customer service fails, and fatigue sets in.

Currently, Broward County has the ability to put out 1,059,960 unit hours per year if staffing and call volume allow.

- Alison collected UHU from two of the four Broward County private ambulance providers. In 2025, One averages 38 units per day and averages a UHU of .28. Number two averages four units per day and averages a UHU of .30.
- At least 42 ambulances are out at any one day reported by the two ambulances providers.
- Data from these two providers averaged 110 minutes for a transport. Providers are active an average of 50 percent of the scheduled time.
- Must have objective recommendations for the Board of County Commissioners on determining needs.

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The providers need to adjust hours/staff where there's a need. The hospitals do not have the crews wait and have the patients ready when they call for a transport.

Based on Model One UHU it appears Broward County currently does not have a need. Even if the County has the ability to use all 121 licensed ambulances. If the workshop recommends, they still could allow limited Class 5/6 to accommodate small business.

Proposed requirements for providers to report staffing and call volume patterns quarterly to identify gaps and open process, if needed, to identify if providers are not staffing correctly for peak times or if there's a problem with service by reviewing the UHU.

MODEL 2 – Ambulance to Trip Ratio

Ambulance to Trip Ratio – Miami-Dade uses this Model. It's as if they label each ambulance with a COPCN. They have a five-trip to one car ratio.

Broward in 2025 had 66,490 transports and 121 licensed ambulances. If they used all 121 ambulances:.

- 121 ambulances – 1.5 trips to car ratio
- 60 ambulances – 3.03 trips to car ratio
- 30 ambulances – 6.07 trips to car ratio

Using 30 ambulances would indicate the need to have additional ambulances on the road (exceeding the above 5 to one ratio).

Recommendations for using this model are basically the same, although they would count ambulances. They can put 121 ambulances on the road.

- Limit Class 6 to accommodate small business as was the wish of the EMS Council and Commission.
- This model would grandfather current providers and ambulances but require proof of need for additional ambulances.
- Report their staffing and volume patterns quarterly to identify gaps. Change the process if needed.
- Broward County could change the ambulance to trip ratio.

MODEL 3 – Ratio per Population

Ratio per Population – Country comparisons showed one ambulance to 13,000 people all the way up to one ambulance per 53,000 people. This model can be flexed subjectively more than the other models. With this model, when they compare county to county, they look at population and all ambulances available (private ambulances and all agency ambulances).

Broward County population is about 2,000,000 using 121 private and about 150 agency

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ambulances. It would be one ambulance to about 7,407 people.

KEY DISCUSSION POINTS

- Commission wants to know: Do they have enough ambulances to run the system safely on a daily basis and when an emergency happens can they call enough ambulances?
- People can make major complaints through Consumer Protection. Suggested a PSA to educate.
- Three of four hospital districts provided data.
- Since 2023 call volume increased by 5,543 and response time reduced by 9.28.
- Focus transporting within the agreed-on time (both hospitals and providers).
- Being late (30, 60, 2 hours) with an agreed-on time impacts satisfaction perception.
- Is 85/87 satisfaction sufficient? They need a consensus on the satisfaction rate.
- Hospitals need to make contracts with multiple private ambulances.
- Educate hospitals to call private ambulance providers and not 911 for non-trauma patients
- Are ambulances/hospitals adjusting staff, etc., for peak hours? Take into account UHU.
- Possible to have the ambulances/hospitals dispatched similar to 911 calls where data is recorded.
- Is the system functioning for all stakeholders at the level they want? Collect data from all parties automatically on a regular basis then run the analysis and make recommendations for improvement.
- Collect data from all parties automatically on a regular basis then run the analysis.
- **MOTION TO RECOMMEND** using Model 1 (UHU ratio .30 to .50), Model 2 (ambulance to trip ratio) of 5 to 1, and Model 3 (ratio per population) ratio range of 1 to 13,000 to 53,000. This is for needs perspective.
- **MOTION to REVIEW** need annually and open the COPCN application process no more than three years or any time there is a need.
- EMS Review Committee makes a recommendation to approve or deny an ambulance application. Commission makes the final decision to approve or deny.
- If you have a system that locks competition out performance/quality could diminish.
- Focus on residents rather than if its beneficial to hospitals and ambulance providers.
- For private providers: What's the reasonable cycle for an ambulance? Probably 8-10 months for the COPCN application process.
- The ordinance can be general, but the contract must be specific for required needs data.
- Contracts with current providers expire December 2026

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MOTIONS

MOTION TO APPROVE the recommendations to Chapter 3½ Ordinance proposed at the EMS Council workshops.

Motion made by: Dr. Evan Boyar

Seconded: Chief Julie Downey

Motion passed unanimously

MOTION to USE Model 1 (UHU) and 2 (Call to Car Ratio) for a needs perspective.

Motion made by Chief Julie Downey

Seconded by Dr. Evan Boyar

Motion to Amend: **MOTION to USE** Model 1 (UHU), 2 (Call to Car Ratio), and 3 (Ratio per Population) for a needs perspective.

Motion made by Chief Julie Downey

Seconded by Dr. Evan Boyar

Motion passed unanimously

MOTION to REVIEW Need annually and open the COPCN application process no more than three years but open any time there is a need.

Motion made by Chief Julie Downey

Seconded by Chief Matthew Whitton

Motion passed unanimously

They past a motion on model 1, 2, and 3. They have to come up with the metrics for each model to recommend to the Commission.

MOTION to RECOMMEND Model 1 UHU (unit hours utilization) ratio .30 to.50.

Motion made by Chief Julie Downey

Seconded by Dr. Evan Boyar

Motion passed unanimously

MOTION to RECOMMEND Model 2 (ambulance to trip ratio) of 5 to 1.

Motion made by Chief Julie Downey

Seconded by Dr. Evan Boyar

Motion passed unanimously

MOTION to RECOMMEND Model 3 (ratio per population) ratio range of 1 to 13,000 to 53,000.

Motion made by Dr. Evan Boyar

Seconded by Chief Julie Downey

Motion passed unanimously

Committee Reports:

Legislative Session – Alison Zerbe

- Session closes March 13, 2026, but may get extended. Alison Zerbe will send EMS Council a full report on the bills proposed.

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Executive Committee – Dr. Frederick Keroff

- No Report.

Public Information, Education – Vacant

- No Report.

EMS Conference – Alison Zerbe for Chief Caruso not present

- Registration is open. Register and book hotels early. www.FirstThereFirstCare.com.

Medical Issues – Dr. Randy Katz not present

- Federal Government has nearly a billion dollars in grants for whole blood delivery.
- There are agencies using drones to deliver whole blood to the scene.
- Grants expire this year. The State may have more funds, but will have to extend the legislative session to receive the funds.
- OneBlood is going to issue a new contract for using their whole blood.

BHAP/Behavior Health Assistance Program – Reverend Forest A. Willis, Jr. not present

- No report

EMS Review – Alison Zerbe

- EMS Review Committee met in January for the E-Care Ambulance application. The Committee recommended denial of Class 2 and 3 applications because there hasn't been a need determined yet. That will go to Commission the end of March or April. There will be a public hearing. She will update everyone,

EMS Grant Committee – Alison Zerbe

- In the past, Florida Department of Health gave a yearly amount of funds for EMS County Government Grant Fund. They changed the process in 2025. It's not a grant they apply for; it's going to be a quarterly disbursement. When there's a solid foundation to move forward, they will begin the grant process for the 2026 funds. Currently, they received around \$20,000 but no total amount.

Old Business – Dr. Frederick Keroff

- No Report.

New Business – Dr. Frederick Keroff

- No Report.

Good of Order

- Nothing

Meeting Dates

- **Cancel June 4, 2026, rescheduled to May 28, 2026**
- September 3, 2026
- December 3, 2026

Adjourned 3:18 p.m.