



SAN JUAN COUNTY PUBLIC HOSPITAL DISTRICT NO. 1
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Honorable Board Members & Chief Administrator
San Juan County Fire Protection District No. 3
1011 Mullis Street
Friday Harbor, WA 98250

May 27, 2020

Honorable Board Members and Chief Administrator Collins:

We are writing you because we recognize that our May 5th decision to withdraw the Interlocal Agreement and to suspend integration activities may have been unexpected, and so want to provide a greater understanding of our decision than can be expressed during a board meeting and to invite further discussion between our boards. We reached our decision against the backdrop of our responsibility to ensure that San Juan Island Emergency Medical Services (“EMS”) delivers to our community the best emergency medical response, critical care ground and marine transport, and advanced life support that their tax dollars can buy. Regardless of each hospital district commissioner’s rationale, we all agreed that the operational aspects of integration had begun to bypass the necessary planning to ensure a successful integration and were creating uncertainty for our staff. That uncertainty was exacerbated by the arrival of the COVID-19 pandemic. Thus, we were compelled to suspend EMS’ integration activities until the Boards could reach mutual agreement on next steps.

Over the past five months, we have grown increasingly concerned about: (1) the lack of a plan for integration; (2) the departure of the current integration proposal from integral Citizen Advisory Group (“CAG”) recommendations; and (3) our organizations’ capacity to effectively prepare for integration while committing to successful COVID-19 response.

Shortly after taking office, new hospital district commissioners learned that CAG report recommendations for an integration plan had not been implemented. Although a Gantt chart was created with a thorough list of tasks, few of the tasks were assigned a manager or a deadline. For example, there remains no strategy for preparing the following essential information:

- Financial planning, including a Capital Equipment Plan and Operational Budgets, and financial forecasts to determine staffing levels;
- Key Performance Indicators for a merged system, and a commitment to publish indicators between now and then so that the effects of integration are visible;
- An agreed-upon, comprehensive implementation plan for levies, rates, and timing; and
- An organizational chart for the resulting Fire and EMS.

This information will also need to take into account anticipated effects of the COVID-19 emergency and address resolution of EMS liabilities during integration.

In addition to the lack of plan, we are concerned about the disregard of CAG recommendations that were approved by both of the Fire District and Hospital District boards. The CAG Report provided the following foundational recommendations:

1. Cross-Trained Paid Personnel: after a grace period;
2. In-house Staffing Paid Personnel: 24/7 staffing;
3. Capital Equipment Plan: capital needs fully detailed and anticipated;
4. Key Performance Indicators: to measure improvements;
5. MPD/MPDD involvement: to ensure oversight by the Dept of Health representative;
6. Operational Budgets: a financial plan and forecasts to determine staffing levels;
7. Board Expansion: to allow representation of Town residents on the Fire Board.

It is not clear how many of these recommendations would be implemented, but the post-CAG steering committee process appears to have rejected cross-trained personnel, a capital equipment plan, key performance indicators, operational budgets, and board expansion. With regard to board expansion, such action is necessary to represent town voters and to handle the tasks and responsibilities that careful oversight of an emergency services organization requires.

In addition, both of the Town of Friday Harbor's intention to keep monies saved for needed capital improvement projects, and the Steering Committee's determination to set a higher tax rate upon implementation have eroded the net-0 assumption of the CAG report, and in light of the COVID-19 crisis likely needs to be reevaluated.

Although many of our concerns predated the arrival of COVID-19 in our region, it has decreased EMS' capacity to dedicate sufficient time to integration planning. Successful response to the COVID-19 emergency requires ample attention by SJIEMS staff and volunteers with special emphasis on safety measures. In addition, the financial impact of the COVID-19 emergency will not be known for some months and perhaps years, and financial forecasts need to be developed for it. Combining two agencies creates uncertainty and stress even in a best-case scenario, and it wouldn't be responsible for

us to add to the uncertain situation for our staff right now by continuing to pursue integration absent a robust planning effort.

With the date of the EMS levy renewal looming in 2021, we appreciate the need to resume integration discussions promptly to determine how a fruitful process would move forward. In contrast with some of the messages you may have heard in the community, we have not permanently withdrawn from the integration process. But we need to ensure that it can occur in a manner that best serves our community, the hospital district, and our dedicated employees. We anticipate that you share this goal and likely some of the concerns expressed above. Toward that end, we propose that our boards convene a virtual meeting in July. Please let us know of your interest in and availability for a meeting then.

Sincerely,

Approved Digitally

Anna Lisa Lindstrum, Commissioner and Chair

Approved Digitally

Everett Clary, Commissioner

Approved Digitally

Trish Lehman, Commissioner

Approved Digitally

Gail Leschine-Seitz, Commissioner

Approved Digitally

Kyle Loring, Commissioner and Vice-chair