

REQUEST FOR BOARD ACTION

HENDERSON COUNTY BOARD OF COMMISSIONERS

MEETING DATE: February 19, 2014

SUBJECT: Contract Approval

PRESENTER: Steve Wyatt

ATTACHMENTS: Yes

1. Work Plan Outline
2. Letter of Agreement

SUMMARY OF REQUEST:

At the Board's Budget Workshop in January, the Board directed Staff to engage a facilitator with expertise in emergency services to work with Emergency Medical Services and the Rescue Squad to develop options to meet the long term obligations of both organizations. The County Manager has a proposal from Solutions for Local Government for this study, and recommends approval of such by the Board. The report would be due in mid-May.

BOARD ACTION REQUESTED:

The Board is requested to approve the contract with Solutions for Local Government as presented.

Suggested Motion:

I move the Board approve the contract with Solutions for Local Government as presented.

Work Plan Outline

Task	Major Activities
1.Facility Needs & Options	<p>1.1 Meet individually with designated representative(s) of EMS and Rescue;</p> <ul style="list-style-type: none"> § Tour existing facilities § Note amount of space § Current use of space § Condition of individual spaces & building § Appropriateness/functionality of existing site § Document conditions found; EMS, Rescue <p>1.2 Discuss existing operations and related space needs requested;</p> <ul style="list-style-type: none"> § Vehicles § Equipment § Training/meeting space § Maintenance & work space § Office space § Materials & supply storage § Staff/volunteer support spaces § Quantify & document initial findings; EMS, Rescue <p>1.3 Collect & review available data from each agency regarding day-to-day operations and recent year performance;</p> <ul style="list-style-type: none"> § Current staffing and/or organizational charts § Current responsibilities assigned § Annual reports indicating experienced performance; for example (but not limited to), the number of : <ul style="list-style-type: none"> -EMS calls dispatched -Rescue calls dispatched <p>1.4 Research appropriate professional and regulatory, standards-setting organizations to identify if/as available, the applicability of the facility space needs requested; i.e.</p> <ul style="list-style-type: none"> § OSHA § NC Office of Emergency Medical Services § NC Association of Rescue & EMS § National Fire Protection Association (NFPA)
2.Facility Development Options	<p>2.1 Prepare an individual space needs matrix for each department's facility requirements;</p> <ul style="list-style-type: none"> § Current space allocated § Issues identified with regards to current space § Current space deficit (needs) as identified by consultant § Total space needs projected/department

2.2 Schedule and facilitate meeting with designated EMS and Rescue representatives to discuss shared space options in/for new facility(s);

- § Vehicles
- § Equipment
- § Administrative
- § Meeting/training
- § Staff support
- § Operations support
- § Other

2.3 Identify logistics of sharing space;

- § Different uses
- § Scheduling
- § Distribution of responsibilities
- § Potential conflicts
- § Facility security

2.4 Identify concepts and options for shared facility(s); for example:

- § Fully, shared & operationally integrated facility
- § Shared common areas but separated garage and administration areas
- § Separate space for each, but within the same structure

2.5 Prepare conceptual adjacency diagrams to illustrate the preferred facility option(s).

3. Facility Site Requirements

3.1 Identify estimated area of each facility's footprint.

- § Identify points of building access & egress
- § Designate EMS, Rescue, and shared spaces

3.2 Identify parking requirements.

- § Number of staff personal vehicles
- § Number of County assigned vehicles
- § Number of public visitor vehicles
- § Vendor/delivery vehicle requirements

3.3 Identify specific site requirements.

- § Vehicle access & egress from highway
- § Site circulation
 - EMS & Rescue vehicles
 - Pedestrian vehicles
 - Delivery vehicles
 - Staff personal & assigned County vehicles
- § Set aside/allocation of space for future expansion
 - Basis for & amount of space
- § Adjacent property setbacks
- § Additional issues as identified

4. Physical Site Assessment

4.1 Visit the site designated for consideration by the County.

- § Assess the site's capability to accommodate the *site* requirements identified in Task 3.
 - Base facilities
 - Parking
 - On-site vehicle & pedestrian circulation
 - Site access & egress
- § Consider existing topography with regards to constructability & site development issues

4.2 Determine the applicability for continued/re-use of existing site structure(s) based on the facility requirements identified in Tasks 1 & 2.

- § General physical condition of the building(s)
- § Review architectural drawings (if available) and/or measure available space for uses considered
 - Enclosed parking for EMS & Rescue vehicles
 - Administrative and office/work space
 - Meeting/training space
 - Staff support areas
 - Operations support areas
 - Other

4.3 If existing building re-use options are identified, prepare building concept diagrams illustrating how the spaces needs identified in Tasks 1 & 2 for EMS & Rescue would "fit" and function within the building.

4.4 Prepare an overall site concept diagram illustrating how the site requirements identified in Task 3 would be applied and implemented.

5. Management Review

5.1 Meet with County Manager to present and discuss information and materials developed to date;

- § Preferred facility option(s)
- § Shared vs. separate spaces
- § Overall space needs
- § Parking requirements
- § Site concept diagram(s)
- § Receive comments & determine if additional modifications are required

6. Probable Costs

6.1 Prepare, for each facility option identified, an estimate of probable development, construction, and project related costs;

- § Design
- § Site development

	<ul style="list-style-type: none">§ Construction§ Project related<ul style="list-style-type: none">-A/E Fees-Survey-Soils testing-Materials testing-Furnishings & equipment-Escalation-Contingencies
7.Documentation	7.1 Prepare draft report for review by County Manager and/or those he may designate; <ul style="list-style-type: none">§ Submit written draft to County Manager for review§ Receive comments & address as necessary
8.Formal Presentation	8.1 At such time as designated by the County Manager a formal summary presentation of the documented findings and recommendations will be provided to the County Board of Commissioners.

Deliverables

- § On-site visits as required to meet with designated County, EMS, Rescue representatives and collect information necessary to perform the study tasks and activities identified; estimated minimum of 10-12 days.
- § Participation in and presentation of information Management Review Meeting.
- § One (1) formal presentation of study findings and recommendations to the Henderson County Board of County Commissioners.
- § Development, production, and delivery of eight (8) printed and bound copies of the final report document to the County.
- § Upon completion of all work tasks, the final report document as well as any specially prepared presentation materials will be provided to the County in CD format.

Schedule

Based upon the Scope of Services outline presented here, a schedule of 7-9 weeks is suggested.

The delivery of the final report document, pending any additional research requested, would occur *within* ten (10) days of the final draft review by the Manager; Task 6.1.

Fee Proposal

The costs that make up the proposed fee are based on:

- § Man-hours; both on-site and "in-office", and
- § Project related expenses for travel, communications, materials preparation, and document production

At this time it is estimated that the tasks and activities necessary to complete this project will require approximately 150-160 man-hours.

Therefore, based on the stated project requirements and the major tasks and project deliverables identified in the above Work Plan Outline our proposed fee to complete this Public Safety and Transportation Space Needs Assessment & Facility Program, *including all related project expenses is, and will not exceed, \$18,400.00.*

Our practice is to bill monthly, typically on or about the 1st, based on the percentage of the work completed during the previous month. Once the fee is agreed upon, we *do not* add service or administrative fees, or any form of miscellaneous overhead charges to our billing at any time during the project.

In addition, we will withhold billing the final 10 percent of our fee until you have received the agreed upon copies of the report document and are satisfied with the work that has been done.

Additional Firm Information

Solutions for Local Government, Inc. is a legal, Sub-Chapter 'S' Corporation, authorized and registered with the North Carolina Secretary of State; SOSID: 0624915

Federal IRS Employer Identification Number: 81-0546253

Business Address:

2301 Valencia Terrace
Charlotte, NC 28226

Phone: 704.366.9719
Toll Free: 866.300.3545



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January 24, 2014

LETTER OF AGREEMENT

Mr. Steven Wyatt
Henderson County Manager
1 Historic Courthouse Square; Suite #2
Hendersonville, NC 28792

Re: EMS-Rescue Facilities Needs Assessment

Dear Mr. Wyatt:

The enclosed Work Plan Outline highlights the major tasks we will undertake to identify and document the information necessary to complete the requested EMS-Rescue Facilities Needs Assessment for Henderson County.

While I have attempted to organize the major tasks and subtasks sequentially, there may be activities that occur simultaneously or that will need to be repeated or revisited based upon new research or findings that occur along the way. None the less, it is intended that the tasks and activities described in the attached task outline provide the performance criteria for this agreement.

At this time I anticipate that we should be able to schedule the referenced Management Review Meeting (Task 5) approximately 6 weeks from commencement of work.

Our proposed fee to produce this study and provide the County with the necessary documentation, including all related project expenses for travel, communications, and document production is, *and will not exceed*, \$18,400.00. Services will be billed monthly based on the percent of work complete.

If the foregoing terms meet with your approval, please sign and return one copy of this letter at your convenience, to the address listed below.

I am very much looking forward to working once again with you, and with Henderson County.

Sincerely,
SOLUTIONS FOR LOCAL GOVERNMENT, INC.

OWNER:
Henderson County
Hendersonville, North Carolina

CONSULTANT:
Solutions for Local Government, Inc.
Charlotte, North Carolina

(Signature)
Title: _____
Date: _____



Stephen J. Allan
President
Date: 24 JANUARY 2014

Enclosure