



Ambulance Service Contract Resolution and Ambulance Services Update

May 10, 2022

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Recommended Actions

- Approve the attached Resolution (Attachment A) adopting a policy setting forth issues to be considered for inclusion in contracts for the provision of emergency ambulance services entered into or renewed on or after January 1, 2022
- Approve and authorize issuance of the Request-For-Proposals (RFP) for an Exclusive Ambulance Services Provider for the Santa Barbara County Exclusive Operating Area
- Authorize the Public Health Department to negotiate and return to the Board for approval of a Fifth Amendment to the Professional Services Agreement with American Medical Response West (AMR) extending the termination date to allow for completion of the Ambulance Services RFP process

Overview of AB389

- AB389 established CA Health and Safety Code 1797.230 and 1797.231
- 1797.230 requires the County Board of Supervisors to adopt, by ordinance or resolution, a written policy setting forth issues to be considered for the inclusion in any County contract for emergency ambulance services entered into or renewed on or after January 1, 2022.
- AB389 intended to be a declaration of existing law and not “alter, modify, abridge, diminish, or enlarge the requirements” for creating an Exclusion Operating Area under Health and Safety Code 1797.224

Issues to be Considered in the Resolution

- Employment retention requirements
- Disaster response and preparedness
- Minimum qualifications for the bidders
- Diversity and equity efforts
- Financial requirements
- Cost recovery mechanism for the County
- Community engagement, outreach, and education
- Emergency takeover/replacement provisions in the event of a major breach in the agreement
- Ongoing workforce development
- Staffing levels and compensation

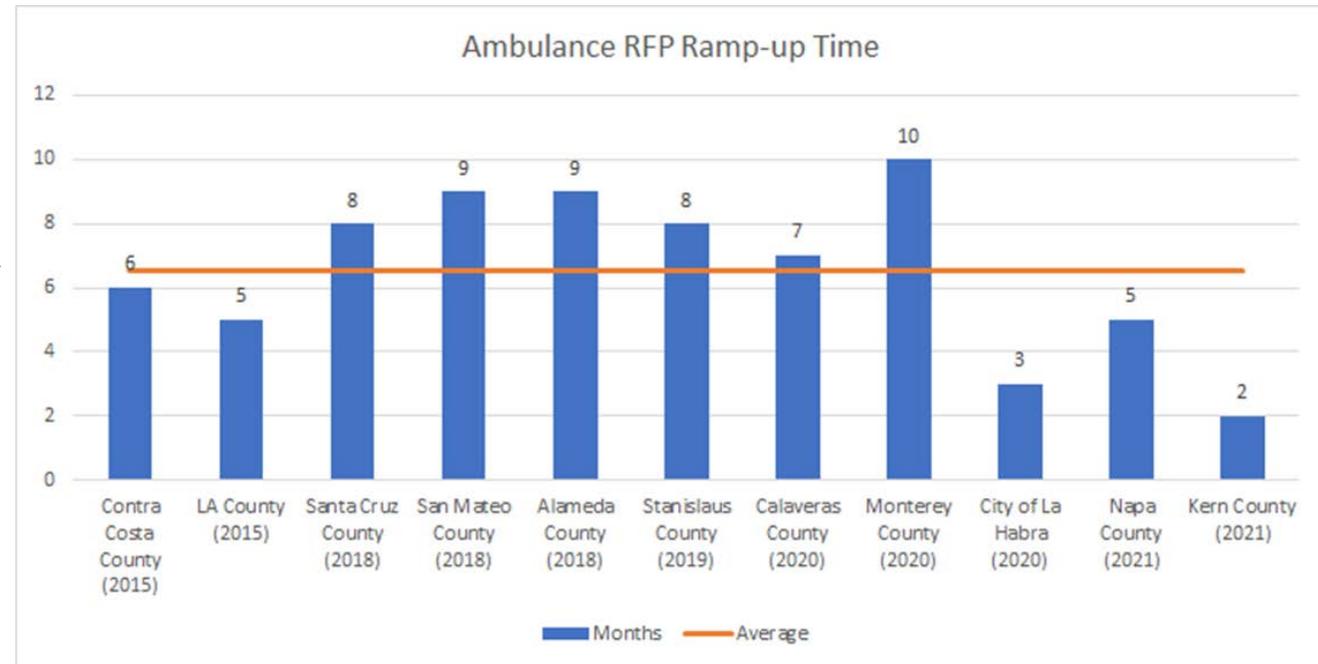
These items have been included in the Ambulance RFP.

Ramp-up Period

- Allows winning bidder time to procure the equipment and develop the infrastructure to provide service on the 1st day of the agreement

- Challenges to Ramp-Up Period

- Out-going provider required to maintain service levels while staff transition to new provider.
- Could result in service delivery challenges
- Goal is to strike the balance for the incoming and outgoing providers
- The industry average is approximately 7 months*



**Prior to COVID and supply global chain issues*

Supply Chain Challenges

- Ambulances are made-to-order
- Global supply chain impacts delayed ambulance manufacturing
 - Current situation: 12-16 months lead-time
 - Potential bidders have indicated they could be ready within 1-8 months
- LEMSA has extended the ramp up period to 11 months
 - Does not include the 2 months between *Intent to Award* and *Contract Presentation to the BOS*

RFP Timeline Overview

October 1, 2019: Board direction to initiate an Ambulance RFP

March, 2020: RFPAC met to develop Consultant RFP.

August, 2020: Consultant RFP awarded to CityGate Associates, LLC (CityGate)

November, 2020: Out of an abundance of caution, RFPAC recommended LEMSA terminate the agreement with CityGate. LEMSA contacted the next qualified bidder Fitch and Associates (FITCH)

January, 2021: FITCH began working on the Ambulance RFP

November, 2021: Draft Ambulance RFP was released for potential bidder comment

LEMSA received comments from various potential bidders, as well as the County Fire Chiefs' Association.

December, 2021: LEMSA sent a clarification request to the California EMS Authority (CAEMSA) regarding Exclusive Operating Area (EOA) boundaries.

January, 2022: LEMSA received a response from CAEMSA

February, 2022: LEMSA sent the Draft Ambulance RFP to CAEMSA

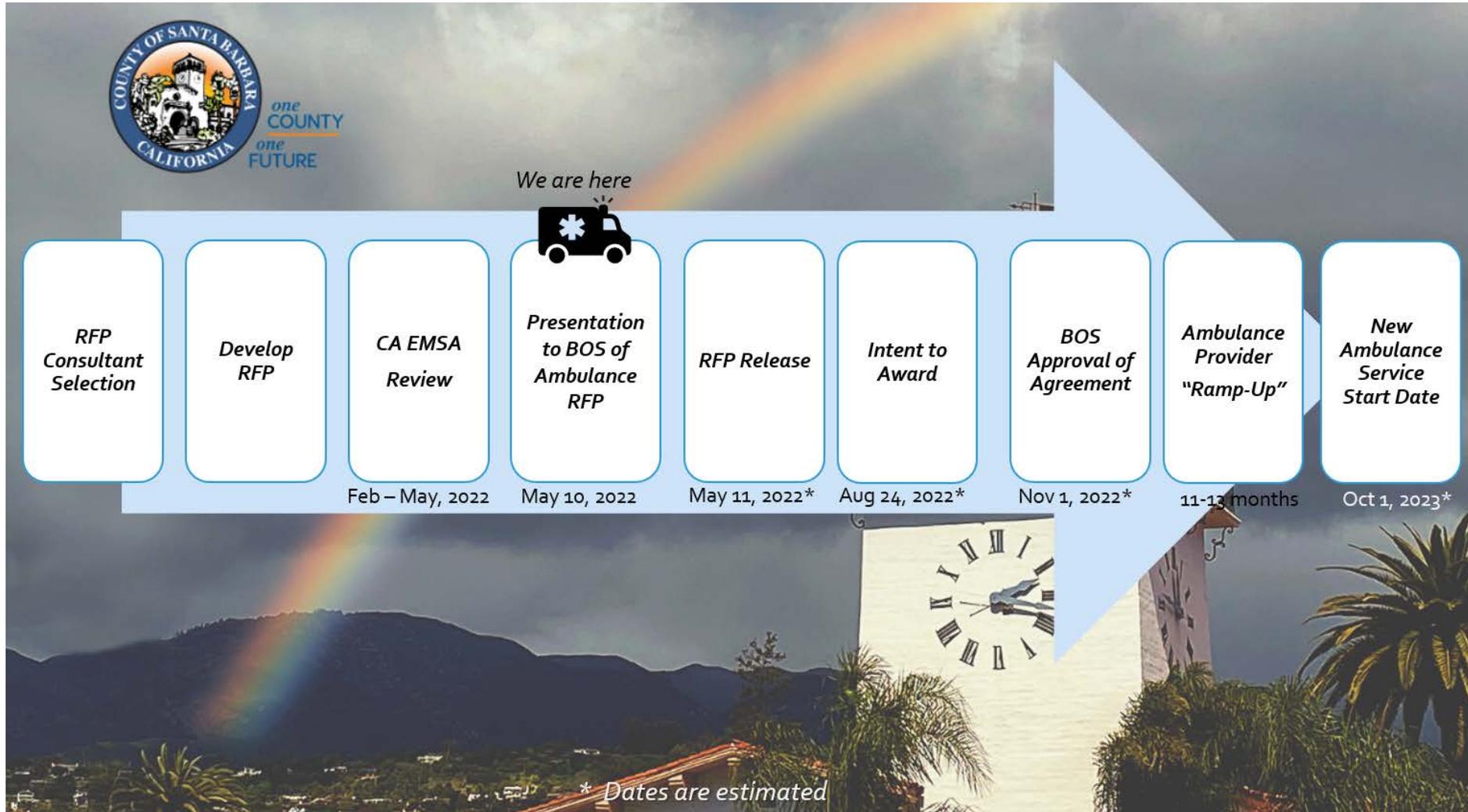
March, 2022: LEMSA received feedback from CAEMSA

April, 2022: LEMSA sent amended Ambulance RFP to CAEMSA

May 3, 2022: LEMSA received CAEMSA approval of the Ambulance RFP

May 10, 2022: LEMSA presents Ambulance RFP status and document to the Board of Supervisors

RFP Projected Timeline



Short-Term Extension with AMR

- Current agreement expires December 31, 2022
- At the time of the docketing of this presentation:
 - AMR and LEMSA have explored a short-term extension
 - LEMSA expects to return to your Board in June, 2022

What if there is a Gap in Service

- If the Ambulance RFP timeline extends beyond the end date of the agreement with AMR Agreement, the County will need to secure emergency and non-emergency ambulance service delivery for the gap between the end of the agreement and the start of the new agreement resulting from the Ambulance RFP.
- Scenarios that could create this gap:
 - The Ambulance RFP process is challenged via legal proceeding(s)
 - The Ambulance RFP process is delayed due to unforeseen circumstances
 - Supply chain or other “ramp-up” challenges cannot be overcome during the “ramp-up” period
 - The County and AMR are unable to execute an agreement to cover this gap
 - There are no responsive bids to the Ambulance RFP
 - The County and the winning bidder are unable to negotiate an agreement prior to the gap
 - CAEMSA’s review of the resulting agreement is not completed in time
- LEMSA staff remain confident that by working with all our existing EMS System participants, we can ensure service delivery if any of the above (or other) scenarios occur.

Key Goals of the Ambulance RFP

- Triple Aim
 - Patient Experience
 - Population Health
 - System Cost
- EMS Agency Values
 - Community Access & Education
 - Provider Safety & Support
 - Clinical Excellence
- 2018 EMS System Review
 - Input from over 60 providers; all disciplines represented
 - 23 EMS System initiatives presented

RFP ADVISORY COMMITTEE

- RFP process initiated at direction of your Board in October, 2019
- RFP Advisory Committee established to:
 - Define Consult Scope of Work and select RFP Consultant
 - Provide policy level direction on Ambulance RFP
- RFP Advisory Committee consists of:
 - Assistant CEO
 - Public Health Department Director
 - Public Health Department Deputy Director
 - Behavioral Wellness Director
- Committee Staff:
 - EMS Agency
 - FITCH
 - County Counsel
 - County Procurement
 - County Risk Management

RFP Advisory Committee

- Provided policy-level guidance on Ambulance RFP
- Examples of Guidance
 - Ambulance RFP procedural timelines
 - Ambulance RFP amendments as requested by CAEMSA
 - Approving the financial requirements of the Proposers
 - Defining the boundaries of a single EOA
 - Validation of response time requirements
 - Support for innovation in the medical health patient and interfacility transport systems
 - Ensuring diversity, equity, and inclusion was included for the providers and patients
 - Staffing requirements in the Ambulance RFP
 - Confirmation of the clinical standards set forth in the Ambulance RFP

Ambulance RFP: Key Components

System Structure

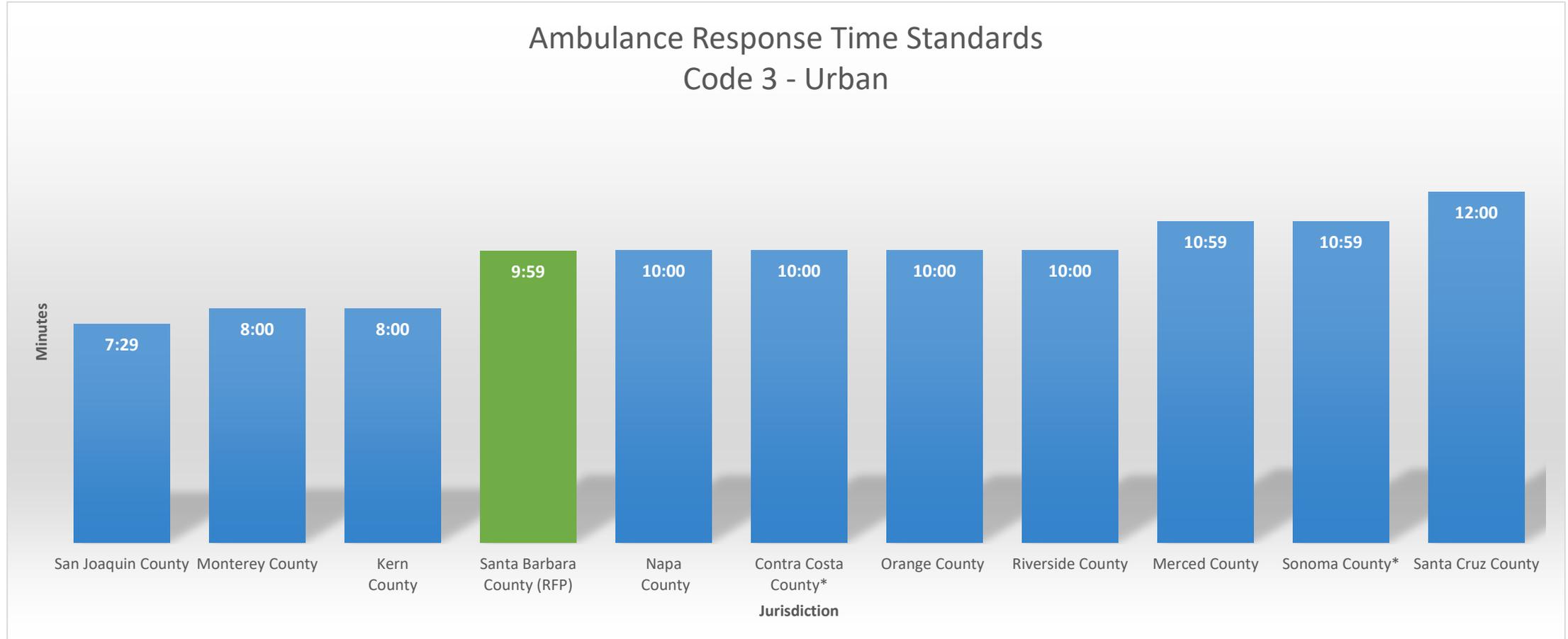
Current 2005 Agreement

- Response Time Requirement: 7:59
 - If ALS Fire on-scene within 7:59, 2-minute extension equaling a 9:59 response time
- Subcontract between Contractor and Fire allowed
 - Subcontract also allowed to extend the response time requirement
- Operating Areas
 - 3 Zones
 - Zone 1: Exclusive, encompasses most of the County
 - Served by AMR
 - UCSB Campus served by County Fire
 - Zone 2: Non-Exclusive Lompoc and Vandenberg Village
 - Served by AMR and County Fire
 - Zone 3: Exclusive, New Cuyama
 - Served by County Fire
 - Interfacility Transport (IFT) is served by AMR countywide

CAEMSA Approved RFP

- Response Time Requirement: 9:59
 - Extensions not allowed
 - Standardizes response time to 9:59 across County, aligns with longest allowed time 2005 agreement
- Subcontract between Contractor and Fire allowed
 - Response Time extension sub-contract not allowed
- Operating Areas
 - 1 Zone
 - Exclusive, covers the entire county
 - Includes UCSB and New Cuyama
 - Interfacility Transport (IFT) is served by Contractor countywide

Ambulance RFP: Response Time



**Indicates a county with multiple response time requirements, the time listed is the shortest requirement*

Ambulance RFP: Key Components

Community Access & Education

Current 2005 Agreement

- Interfacility Transport (IFT)
 - Response times are defined
 - No financial penalties
 - No coordination required with hospitals
- Mental Health Transport
 - None listed
- Health Equity
 - Contractor must follow County Ordinance
- Patient Experience
 - Surveys recommended
- Community Education
 - Required to participate in EMS System education
 - Recommended to offer a variety of programs
- Translation Service Access
 - Not required

CAEMSA Approved RFP

- Interfacility Transport (IFT)
 - Response times are defined
 - Financial penalties
 - Coordination required with hospitals
- Mental Health Transport
 - Response times are defined
 - RFP solicits further innovation
- Health Equity
 - Diversity, Equity, and Inclusion training required
 - Addresses various aspects health equity and bias
- Patient Experience
 - Surveys required
 - Customer service hotline required with response requirements
- Community Education
 - RFP solicits a education proposals
 - 1 significant event per year required
- Translation Service Access
 - Required

Ambulance RFP: Key Components

Provider Safety & Support

Current 2005 Agreement

- Staffing and shift length
 - 48-hour maximum
 - Limit on Unit Hour Utilization (how busy the unit has been)
 - No rest requirements
- Training platform and standards
 - Standardized platform not required
 - Required to be a CE Provider
- Employee Safety & Wellness
 - Stress reduction program required
 - Limited on-going training required

CAEMSA Approved RFP

- Staffing and shift length
 - 60-hour maximum
 - Increased limit on Unit Hour Utilization (how busy the unit has been)
 - 12-hour rest requirement for busy units
- Training platform and standards
 - Standardized platform required
 - Required to be a CE provider
 - On-going training in customer service and other key areas required
- Employee Safety & Wellness
 - Stress reduction program required
 - Employee resilience program
 - On-going driver training required
 - Ambulance dash camera required

Ambulance RFP: Key Components

Clinical Excellence

Current 2005 Agreement

- Continuous Quality Improvement (CQI) Program
 - Required
- Contractual Clinical Performance Standards
 - None
- Financial Penalties
 - None
- Clinical Innovation
 - Encouraged
- Clinical Culture
 - Not required

CAEMSA Approved RFP

- Continuous Quality Improvement (CQI) Program
 - Required
- Contractual Clinical Performance Standards
 - Required
- Financial Penalties
 - Fines and discounts established
- Clinical Innovation
 - Required
- Clinical Culture
 - Required

Ambulance RFP: Clinical Excellence

- Emphasis of the Ambulance RFP is on patient outcomes
- Use of patient-centered metrics to evaluate Contractor performance
- Faster response times are not generally associated with better clinical outcomes
- Contractor's clinical performance impacts response time compliance penalties
 - Response time penalty discounts applied for superior clinical performance
- LEMSA developing first ever clinical compliance tool with FirstWatch
 - Mirrors current response time compliance tool
 - Working with other LEMSAs across State to develop with FirstWatch

Ambulance RFP: Clinical Compliance Tool

Non-Compliant Review ECITY-2212521

Date/Time	Incident Number	Address/Location	Unit	Problem
04/06/2022 04:19:55	ECITY-2212521	From AMRSantaBa...	M9	*Falls C3

Metric	Pass/Flag	Exemption	Approved	Denied
12 Lead within 10 min.	❌	[None]	<input type="checkbox"/>	<input type="checkbox"/>
Aspirin Administered	❌	Hospital Order	<input type="checkbox"/>	<input type="checkbox"/>
Nitro Administered	❌	[None]	<input type="checkbox"/>	<input type="checkbox"/>
STEMI Alert within 10	✅	[None]	<input type="checkbox"/>	<input type="checkbox"/>
Transported to appropriate facility	✅	[None]	<input type="checkbox"/>	<input type="checkbox"/>

Incident Drill-down

Incident Details			
Customer ID	178 (c)	Phone Pick Up	04/06/2022 04:19:41
ID	3357098	First Call Taking	04/06/2022 04:19:42
FWTimeStamp	04/06/2022 05:11:50	Keystroke	
Response Date	04/06/2022 04:19:54	Pickup Requested	
Master Incident #	ECITY-2212521	Pickup Promised	
Agency Type	EMS	Call Entered Queue	04/06/2022 04:19:55
Jurisdiction	E CITY FIRE	Call Taking Complete	04/06/2022 04:20:27
		Call Closed	04/06/2022 05:11:02

Owner: [No Owner] Status: [Review] Exemption Reason: [No Exemption Reason]

Buttons: SAVE CHANGES, SAVE AND CLOSE

Comments: 2000 characters remaining, SAVE

- Tool should be live in several months
- Automates PCR review
- Adjudication process
- Will calculate discounts/fines

QUESTIONS?



one
COUNTY

one
FUTURE