

de la Guerra, Sheila

Public Comment

#4



From: Stockton, Courtney
Sent: Monday, May 9, 2022 4:29 PM
To: sbcob
Cc: Hartwig, Mark; Williams, Das; Hart, Gregg; Hartmann, Joan; Nelson, Bob; Lavagnino, Steve
Subject: Item D-4 May 10 Agenda
Attachments: Public Comment re Item D4 - Ambulance Service Contract Policy Resolution and Ambulance Services update.pdf

Good Afternoon,

Attached please find correspondence from Fire Chief Mark Hartwig regarding Agenda Item D-4 on the Board of Supervisors Agenda for Tuesday, May 10.

Thank you,

Courtney Stockton
Executive Assistant
Santa Barbara County Fire Department
4410 Cathedral Oaks Road, Santa Barbara, CA 93110
(805) 681-5552 (office)
(805) 896-6985 (cell)
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Fire Department

"Serving the community since 1926"

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Mark A. Hartwig
Fire Chief
County Fire Warden

Rob Heckman
Deputy Fire Chief

May 9, 2022

Ms. Van Do-Reynoso, PhD
Director Santa Barbara County Public Health

RE: D-4 - Ambulance Service Contract Policy Resolution and Ambulance Services Update

Based on the Board Agenda Letter and attachments for the Board's May 10th hearing and made available to the public on May 5th, it is clear that based on feedback from State EMSA, County LEMSA has made the decision to include the area covering University of California Santa Barbara (currently served under contract with the University by County Fire) as part of the EOA in the RFP. This was not in the draft RFP previously available for review and comment. Please be advised that the County Fire Department objects to this change.

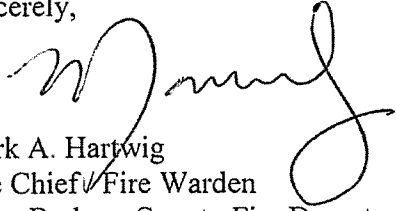
The objections to removing the ambulance service from County Fire include, but are not limited to, the following:

- Currently there is a 2010 Cooperative Agreement in place for Fire Protection, Emergency Response, and Paramedic Services between the County of Santa Barbara and the University of California, Santa Barbara campus (enclosed herein). The Agreement remains in effect until either the University or the Fire Department serves on the other a 180-day Notice to Terminate the agreement. Both parties are currently satisfied with the agreement.
- Service levels to the University will be reduced unless 24/7/365 location staffing is specifically required within the RFP (similar to the Cuyama service area). The current version of the RFP does not require a dedicated ambulance.
- The Fire Department relies on revenues generated by the agreement and associated staffing in the current Fire Department budget. If the agreement is terminated it would have an unanticipated impact of \$600,000 in annual revenue loss for the Fire Department and/or require additional payment in the same amount from the University to maintain mutually agreed upon service levels.
- Removing the ambulance service from County Fire potentially removes two (2) cross-trained dual-role firefighter paramedics from the daily staffing at the UCSB and/or increases the financial obligation of the University to the Fire Department

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pursuant to the existing Long Range Development Plan (LRDP) in effect between the County, UCSB and the City of Goleta.

Sincerely,

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Mark A. Hartwig
Fire Chief/Fire Warden
Santa Barbara County Fire Department
(805) 896-6400
mhartwig@countyofsb.org

cc: Santa Barbara County Board of Supervisors

de la Guerra, Sheila

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Sent: Monday, May 9, 2022 5:33 PM
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Honorable Chair Hartmann and County of Santa Barbara Board of Supervisors

RE: D-4 - Ambulance Service Contract Policy Resolution and Ambulance Services Update

As the County Fire Department contemplates bidding on the Santa Barbara County Countywide Emergency Ambulance contract, we, in partnership with Operational Area stakeholders, have eagerly anticipated the opportunity to propose significant system enhancements through an equitable and transparent bid process. However, the Fire Department has several significant concerns with the RFP in its current format. These concerns are centered around what we believe would be a significant service reduction contained within the RFP as well as the overall subjectivity related to qualification determination and scoring criteria/weighting.

The most notable service reduction is the elimination of the dedicated paramedic ambulance from the UCSB campus. We have addressed this concern in further detail in a separate public comment letter (Attachment A).

A glaring omission in the evaluation matrix is the absence of any scoring consideration for additional revenue returned back to the County to support the development and expansion of programs such as community paramedicine/mobile integrated health. Additionally, there is no scoring consideration for financial resiliency in the form of emergency reserves. Instead, financial assessment is simply a pass/fail criterion.

Upon review of the proposal evaluation criteria, I have concerns about how the evaluation criteria will be fairly applied to the County Fire Department because of transparency in scoring and evaluation, incumbent workforce requirements, and firewall limitations between the Fire Department and internal County Departments.

Most of the evaluation scoring is based on points, however how the points will be applied is unknown. 200 of the 400 points allowable on the scoring sheet are related to "Clinical Standards" while "Operational Standards" including staffing and deployment contain just 100 points (Page 30-31 and Appendix 10, Page 99-101). The 200 points

related to “Clinical Standards” seem to be highly subjective. The subjectivity of the scoring and evaluation criteria places much more importance on the five-member evaluation panel. While the procurement process will be conducted by County General Services, the five-member panel is chosen by the Local Emergency Medical Services Agency. In the RFP as presented, it appears that the bid presentations and evaluations are closed to the public and rankings and recommendations are submitted to the Public Health Director. To ensure the bid process is equitable and transparent, the County Fire Department recommends the process be open to the public and the evaluation process include at least two of the Board of Supervisors.

Furthermore, the RFP requires that the provider provide preferential treatment and legacy seniority of the incumbent workforce. While we will do our best to meet this requirement, we are extremely limited due to County Civil Service Rules. In fact, many items in the RFP would be a part of the collective bargaining process between the new workforce and County HR. Therefore, this would likely result in a loss of ten points for Section 5.8, Treatment of Incumbent Workforce.

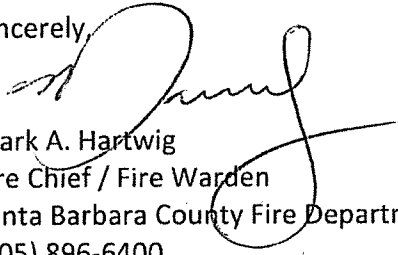
Clinical innovations to include behavioral and mental health program opportunities are highly encouraged within the RFP and comprise as much as ten percent of the available points included on the matrix. Unfortunately, the County Fire Department has been prohibited from collaborating with anyone at County Behavioral Health (BeWell) to mental health innovations reference/discussed in the RFP. This clearly puts our agency at a disadvantage as BeWell will be an important partner in these programs and the County should be able to make someone available in BeWell that is not involved in the RFP process to coordinate with Fire on this matter.

We are concerned as to how the fire agencies within the county fit into the proposed system. Today the ALS providers “stop the clock” for the ambulance provider and are reimbursed (at a fraction of their cost) to provide these services. The new RFP doesn’t require the current arrangement. The removal of “stop the clock” agreements as a requirement will remove \$332,619 annually from the County Fire Department. At the same time, the proposed RFP contains an increase of priority one response times from 7:59 to 9:59 countywide. We have specific examples of how longer response times impact patient outcomes for those in need of immediate medical attention.

The County Fire Department, together with our Operational Area Partners, are the backbone of the County’s Emergency Medical Response system providing Advanced and Basic Life Support first response and ambulance services across the entire County. Together we are poised to be even more integrated with transport services and innovation while providing our community’s improved service, operational transparency, and financial accountability.

While we have not had the opportunity to review the RFP in detail with our consultant, our initial comments and concerns are identified within Attachment B of this letter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mark A. Hartwig', written over the printed name and title.

Mark A. Hartwig
Fire Chief / Fire Warden
Santa Barbara County Fire Department
(805) 896-6400
mhartwig@countyofsb.org

cc: Ms. Van Do-Reynoso, PhD, Director Santa Barbara County Public Health

Attachment A
Public Comment re Item D-4: Ambulance Service Contract
Policy Resolution and Ambulance Services Update



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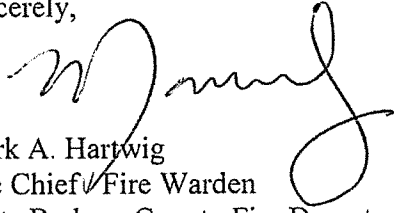
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(805) 896-6400
mhartwig@countyofsb.org

cc: Santa Barbara County Board of Supervisors

Attachment B
Additional Ambulance Service Contract RFP
Comments/Feedback

Page #	Section Header	Subsection	Comments
9	1.5 Significant EMS System Enhancements	E-Pgrph 3	Recommend that an EMS System participant group/committee review and approve utilization of these finds (as historically occurred with Contract Compliance Committee for expenditures of "Penalty Assessment Fund") This promotes utilization of funds in a manner that is reflected and supported by system participants.
10	1.5 Significant EMS System Enhancements	F	Should include language that allows for a change to a mutually agreed upon different set of tools for both i. and ii. This is in case of a less than satisfactory performance by either of these brand of tools (they are both currently newly implemented (less than 1 year) at the LEMSA level. While they may be the long-term tools, it may behoove the contract to have the flexibility to change tools if mutually identified and agreed that it is beneficial.
23	2.10 Proposal Evaluation Process	D. Review Panel	This should include more detail as it is a very important group for this process. i. Specify " <i>medically licensed specialty knowledgeable of EMS best practices.</i> " ii. Include level/time minimum experience required and specify what constitutes " <i>high performance EMS system design and service.</i> " iii. Specify if these are to be local, regional or state level <i>community leaders.</i>
36	4.3 Liquidated Damages Provisions.....	Prgph 2:	Please clarify/define what " <i>damage</i> " the Local EMS Agency is incurring.
39	4.8 Dedicated Personnel Required.....	Prgph 2	Provide maximum hours of " <i>internal staffing support</i> " to clarify appropriate allocation of work hours and staffing by contractor
41	5.2 Ambulance Staffing....	C) Electronic Database	Reword to say "LEMSA shall be provided access to this data upon request."

45	5.5 Technology	B) PCR	<p>Change language to “<i>Contractor shall utilize an ePCR product that provides all LEMSA required data fields and is compliant to the current data dictionary and NEMSIS version utilized by the local EMS system as directed by the LEMSA.</i>”</p> <p>Change language to “<i>Contractor shall, at its expense, utilize an agreed upon/approved data mining tool (currently First Watch) to independently ...</i>”</p>
46	5.8 Treatment of Incumbent Workforce	Prgrph 1	“preferentially hire” – is this possible with county HR rules?
46	5.8 Treatment of Incumbent Workforce	Prgrph 2	“all incumbent personnel hired will retain seniority status while working full time....” Should be deleted, as the contract should not dictate another agency/department HR policies and procedures. Language should be changed to indicate support of “a recruitment and hiring process that highly values a workforce with extensive local EMS system knowledge and experience” for the initial hiring.
50	6.2 Response Time Performance Requirements	911 System Requests	Please identify how each of the noted response time limits in A, B, C were determined to assist in understanding. (I defer to our operations to identify if these are realistic time limits based on geography, etc.)
51	6.2 Response Time Performance Requirements	Interfacility Transports	Include language that indicates that the LEMSA shall be responsible for providing training and education to local hospitals and facilities regarding the LEMSA determined Priority categories and associated patient qualifiers and time requirements. Additionally, include language that indicates that the LEMSA will assist in facilitating further education and clarification as needed.

53	6.2 Response Time Performance Requirements	H) Mentally Disordered Persons....	Please clarify the level of EMS assessment required to determine an individual “not to be experiencing and emergency medical condition” and reference the appropriate LEMSA Refusal Policy or other policy that provides for this action by an EMS Responder.
55	6.4 Response Time Measurement...	C) iii	Clarify language in first sentence “by the emergency ambulance,” does not make sense.
55	6.4 Response Time Measurement...	C) iv	Clarify language in last sentence “respond to cancelled calls that are cancelled will be,” does not make sense