



AGENDA
BOARD OF SUPERVISORS
AD HOC EMERGENCY MEDICAL SERVICES COMMITTEE
COUNTY OF MONO
STATE OF CALIFORNIA

MEETING LOCATION Lee Vining Community Center, 296 Mattly Avenue, Lee Vining, CA 93541

November 19, 2015

NOTE: In compliance with the Americans with Disabilities Act if you need special assistance to participate in this meeting, please contact the Clerk of the Board at (760) 932-5534. Notification 48 hours prior to the meeting will enable the County to make reasonable arrangements to ensure accessibility to this meeting (See 42 USCS 12132, 28CFR 35.130).

Full agenda packets are available for the public to review in the Office of the Clerk of the Board (Annex I - 74 North School Street, Bridgeport, CA 93517), and in the County Offices located in Minaret Mall, 2nd Floor (437 Old Mammoth Road, Mammoth Lakes CA 93546). Any writing distributed less than 72 hours prior to the meeting will be available for public inspection in the Office of the Clerk of the Board (Annex I - 74 North School Street, Bridgeport, CA 93517). **ON THE WEB:** You can view the upcoming agenda at www.monocounty.ca.gov. If you would like to receive an automatic copy of this agenda by email, please send your request to Bob Musil, Clerk of the Board: bmusil@mono.ca.gov.

1:00 PM Call meeting to Order

 Pledge of Allegiance

1. OPPORTUNITY FOR THE PUBLIC TO ADDRESS THE BOARD

 on items of public interest that are within the subject matter jurisdiction of the Board.
(Speakers may be limited in speaking time dependent upon the press of business and number of persons wishing to address the Board.)

2. AGENDA ITEMS

A. Meeting Minutes

 Approve minutes of the Special Meeting held on September 22, 2015.

B. Meeting Minutes

 Approve minutes of the Regular Meeting held on October 1, 2015.

Recommended Action: Approve meeting minutes as presented or as corrected.

C. Overview of Current EMS system

30 minutes (10 minute presentation; 20 minute discussion)

(Mike Geary) - Overview of current Mono County EMS system, including role and involvement of Mono County Paramedics, local fire protection districts, private providers, and others. Continuation of discussion of possible modifications to current system.

Recommended Action: None (informational only). Provide any desired direction to staff.

D. EMS Models Workshop

(Bill VanLente) - Interactive workshop led by Bill Van Lente regarding potential EMS models for Mono County, including review and discussion of information received to date, discussion of details related to specific models, and future steps. Any additional information or attachments will be distributed at the meeting.

Recommended Action: Provide any desired direction to staff.

ADJOURN



**OFFICE OF THE CLERK
OF THE BOARD OF SUPERVISORS**

EMS AD HOC AGENDA REQUEST

Print

MEETING DATE	November 19, 2015	DEPARTMENT	
ADDITIONAL DEPARTMENTS			
TIME REQUIRED		PERSONS APPEARING BEFORE THE BOARD	
SUBJECT	Meeting Minutes		

AGENDA DESCRIPTION:

(A brief general description of what the Board will hear, discuss, consider, or act upon)

Approve minutes of the Special Meeting held on September 22, 2015.

RECOMMENDED ACTION:

FISCAL IMPACT:

CONTACT NAME: Helen Nunn
PHONE/EMAIL: x5534 / hnunn@mono.ca.gov

SUBMIT THE ORIGINAL DOCUMENT WITH ATTACHMENTS TO THE OFFICE OF THE COUNTY ADMINISTRATOR **PRIOR TO 5:00 P.M. ON THE FRIDAY 32 DAYS PRECEDING THE BOARD MEETING**

SEND COPIES TO:

MINUTE ORDER REQUESTED:

YES NO

ATTACHMENTS:

<p>Click to download</p> <p> draft mins 9-22-15</p>

History

Time	Who	Approval
11/13/2015 3:59 PM	County Administrative Office	Yes
11/12/2015 8:48 AM	County Counsel	Yes



**DRAFT MEETING MINUTES
BOARD OF SUPERVISORS
AD HOC EMERGENCY MEDICAL SERVICES COMMITTEE
COUNTY OF MONO
STATE OF CALIFORNIA**

Mammoth Lakes Fire Station, 3150 Main St, Mammoth Lakes, CA 93546

These minutes are meant as a summary only. A copy of the audio file is available in the Clerk's office upon request

September 22, 2015

Flash Drive	portable
Minute Orders	none

1:10 PM Meeting Called to Order by Lynda Salcido.

Present: Mike Geary, Rick Mitchell, Dr. Rick Johnson, Fred Stump, Lynda Salcido, Dave Robbins, Jack Copeland, Frank Frievalt, Rosemary Sachs, Leslie Chapman, Ralph Lockhart.

Absent: Chairman Fesko, Bob Rooks

Adjourn: 4:00 p.m.

Pledge of Allegiance led by Lynda Salcido.

1. OPPORTUNITY FOR THE PUBLIC TO ADDRESS THE BOARD

Mike Geary:

- Intends on providing documentation regarding terminology; ALS versus BLS, scope of practice, etc, for clarification. This may need to be agendized.

Dave Robbins:

- October 1 or October 15 are both open for Dave Fogerson.

2. AGENDA ITEMS

A. Workshop with ICEMA Representative

Departments: Clerk of the Board

Note

These draft meeting minutes have not yet been approved by the Ad Hoc EMS Committee

(Tom Lynch) - Presentation and question and answer with Tom Lynch of Inland Counties Emergency Medical Services Agency (ICEMA).

Dr. Johnson:

- Introduced Tom Lynch, Administrator for Mono County's ICEMA and LEMSA. He is here to share his biases, and we've asked him to be straightforward and honest. Denise from ICEMA is here also.

Lynda Salcido:

- She has to leave at 3 p.m.; Dr. Johnson will preside as Chair on her departure. Each member introduced him/herself to Tom Lynch.

Q 1:

We have struggled to come up with a definition of "high quality" EMS services. There does not seem to be a single definition. The term "high performance" may be confused with "high quality". What are the differences? Is this different than "level of service" (ALS versus BLS)? How would you measure high quality? How do you quantify it? What standards are there, e.g., state versus NFPA? Common components may include:

- a. Dynamic model posting of ambulances based on call history (system status management)**
- b. Formal CQI**
- c. Fractal response time analysis**
- d. Credentialing of ambulances, ambulance systems, and dispatch centers**

Tom Lynch:

- Quality is often subjective. High quality can be benchmarked but is driven by financial realities. Look at not just provision of advanced life support but also if people are performing to the highest level of their licensure? A number of factors should be considered, including physical motor skills coupled with critical judgement. Do paramedics have the ability to develop critical judgements and maintain levels? Need a robust process in place to continually evaluate these. What is your standard for difficult procedures? Success rate? Not one set definition for high quality.
- EMS is designed around resuscitation.
- 8 minute response 90% of the time is typical for fractal response. What are the factors (blizzard, etc) that can be managed? CQI process includes predicting for factors; factors can be mitigated if predicted. In a rural area, what is an acceptable response time?
- Two components for emergency medical dispatch, 1 -pre arrival instructions, 2 -call prioritization.

Q 2:

What criteria are utilized to evaluate the performance of the current EMS system in Mono County? How are we currently performing against these standards?

- Some standards are locally set, like response time, based on availability of resources, funding, etc. Most national and state standards are set based on cardiac arrest patients. Mono County's 16 to 19 minute fractal response time, 93.1% of the time is "phenomenally good". If they are acceptable times, that is for this group to decide.

Q 3:

Do any BLS only transport providers exist within the ICEMA region? If so, what criteria are used to evaluate their performance?

Note

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- In Inyo County, providers toggle between ALS and BLS. Depends on what resources you have available. Levels of licensure and certification can impact the performance of the providers.

Q 4:

What is ICEMA's relationship with the volunteer fire district providers in Mono County? What are the obligations/requirements of these districts to ICEMA?

- Some cases are good, some are non-existent. May be a matter of resources? Would love the bridge the gap between volunteer firefighters and emergency medical calls.
- If you fail to document in the field, how can Dr or hospital down the road know what's happened? Electronic world is pushing toward providing better patient care.

Q 5:

Who writes an RFP? What is the process of development, approval, review, and granting? What are the legal implications, especially for the current EOA's? At what point does the EOA go away?

- ICEMA typically takes lead on RFP. In the case of Inyo County, ICEMA took the first step at drafting the document, hosted a series of workshops with the Board to see what the service should look like. It should never done in a vacuum. Needs to be tempered with state regulations. There are a host of legal implications. If you have a grandfathered provider, EOA – a variety of system providers can interrupt. Historically – public to private cannot go back to public again without an RFP. When the EOA goes, you can have the existing provider continue or make decision to go RFP.

Q 6:

What are the advantages/challenges of different models of EMS services, e.g., private, public, fire, hybrid, JPA, medic/firefighters, volunteer fire, separate Mono County Fire Department? Can you share your experience/knowledge of any/all of these possibilities, or others? And your biases?

- a. Can you give us examples of a private provider ALS service (reasonably similar to Mono County geography and demographics) that has been in continuous service for 7 or more years?
 - b. Which organizational models provide the best service and highest cost efficiency? How can we get the best bang for our buck?
 - c. What types of systems/providers exist within the ICEMA region, e.g., fire, private, 3rd party, etc.?
 - d. Do you have an opinion on staffing levels and/or response capabilities that should exist in Mono County?
- Advantages and challenges include what is sustainable, and what can be funded. All (models) have potential functionality, and these scenarios do exist throughout the country. Funding of resources is the biggest single challenge. One size does not fit all.
 - Stitch together all resources, depending on your own demographics. Does the call volume support an ambulance? Think practical, what can be sustained?
 - All types exist within ICEMA system. It goes back to initial discussion on quality; it depends on what you want. Predicts over next few years, we will see the scope of practice of EMS change. The level of practice will change; some areas will need to expand, others contract.

Q 7:

How much cost info can be obtained without going through a formal RFP process? (Can we obtain this info by requesting as a public document the financials and contract from government agencies that have a third party provider?)

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- a. **If we gave a private firm a brief overview of our jurisdiction, e.g., geography, demographics, call data, etc., do you think we could get a private to come and share with the committee?**
 - b. **Do you have any suggestions as to company/person? Preferred would be a company with a proven and verifiable past performance in an area similar to ours with some longevity of service.**
- Gone are the days of transporting and expecting full payment. Health care providers are making arbitrary decisions of what is medically necessary; payments are based on standard and typical cost of service.
 - ICEMA published power points from conference, Alameda Co shows how reimbursement is shifting rapidly. Suggests reaching out to CA Ambulance Association. He is not in a position to offer a preferred company. He also has doubts that GEMT, once federal government drives down costs, will be cost effective. Drives the concern of longevity of service.

Q 8:

Can you provide us with more detail on the role/relationship between ICEMA and the State EMSA, including any pitfalls we should look out for in moving forward?

- State level has articulated regulations. Obligated once an RFP is initiated, to run through the EMS authority.
- Pitfalls of EMS authority; be cautious in RFP process. Be sure to stay within regulations and be aware of codes.
- Gave an example of an RFP done.

Q 9:

Do you have any thoughts about going in reverse (i.e., returning to an in-house program after going private). Do you have any examples of places that have done this, and their experience - positive or negative?

- If you choose to go RFP, do you allow the existing provider to bid? You are then obligated to the RFP process for 10 years by regulation.
- He spoke of his own experiences with taking over an EMS system with an RFP. He has seen successful and non-successful RFPs.
- Be wary of great differences in bids and contractual allowances. Always goes back to the best patient care you can provide.

The committee then participated in a question and answer session with Tom Lynch for further clarification of his salient points in his presentation. Topics discussed included dispatch models, liability, budgetary concerns, transport vehicles, peak / surge periods at Mammoth Mountain, standard insurance pays and reimbursements, RFP requirements, EOA, and the costs that ICEMA bears.

B. Discussion of ICEMA Presentation

Departments: Clerk of the Board

Discussion among committee members regarding ICEMA presentation and its implications for the committee's tasks.

Frank Frievalt:

- He was very pleased with the presentation that Tom Lynch gave. Felt he dealt with the topics well, got out of it what the "non-smart things" are to do or not to do.
- Spoke of two clauses in the JPA with ICEMA regarding costs to Mono County; need to be taken into consideration.

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Rick Mitchell:

- For the time we have left, if we don't work toward fixing the system we do have, it will be detrimental to the outcome. As things change, he thinks privatization will be less control from the Board's perspective and feels the Board wants to regain more control over the program.
- Tom Lynch coming to speak should have been earlier in the process.

Fred Stump:

- In the past, the program has just been allowed to go on its own. It is important that the full board hear what Tom Lynch had to say, because there may be members that still think there's a simple answer. The Board needs full information in order to make a decision on which path to follow. He wishes this had been earlier in the process.

Rick Mitchell:

- Concern over cost to leave the system with ICEMA, as well as cost to bid into a new service.

C. Discussion of Future Potential Presentations

Departments: Clerk of the Board

Discussion regarding presentations by interested parties, including questions to be asked, scheduling, outreach, determination of speakers, and format.

Dr. Johnson:

- We need to decide if we are inviting three or more providers to come October 1st, what information do we want from them? What specific questions are we going to ask?

General discussion: So far, we have Judd Symons, Dave Fogerson, and Mono County EMTs coming on October 1st. The committee should give each presenter 30 minutes for their presentation, leave 15 minutes to ask questions. The committee should have a question and answer session with the three as a panel after their presentations.

Needs to be clear that this is not an application (RFP) process. Need to keep it informative, but not an application. Advisory committee, tasked with providing information to Board of Supervisors. This committee needs advice. The committee needs to ask specific questions for a specific model if we have three different models being represented.

Questions to be asked of the presenters:

What is their business model, and how have they evolved over the years (how they got started, what pitfalls and solutions have they encountered)?

What service levels do they provide?

Why is their type of system a superior system?

How do they fund the difference between revenue and costs?

What advice would they give us knowing what they know about Mono County?

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Note

These draft meeting minutes have not yet been approved by the Ad Hoc EMS Committee

ADJOURN

ATTEST

LYNDA SALCIDO
VICE-CHAIRMAN

HELEN NUNN
SR. DEPUTY CLERK OF THE BOARD



**OFFICE OF THE CLERK
OF THE BOARD OF SUPERVISORS**

EMS AD HOC AGENDA REQUEST

Print

MEETING DATE	November 19, 2015	DEPARTMENT	
ADDITIONAL DEPARTMENTS			
TIME REQUIRED		PERSONS APPEARING BEFORE THE BOARD	
SUBJECT	Meeting Minutes		

AGENDA DESCRIPTION:

(A brief general description of what the Board will hear, discuss, consider, or act upon)

Approve minutes of the Regular Meeting held on October 1, 2015.

RECOMMENDED ACTION:

Approve meeting minutes as presented or as corrected.

FISCAL IMPACT:

CONTACT NAME: Helen Nunn

PHONE/EMAIL: x5534 / hnunn@mono.ca.gov

SUBMIT THE ORIGINAL DOCUMENT WITH ATTACHMENTS TO THE OFFICE OF THE COUNTY ADMINISTRATOR
**PRIOR TO 5:00 P.M. ON THE FRIDAY
32 DAYS PRECEDING THE BOARD MEETING**

SEND COPIES TO:

MINUTE ORDER REQUESTED:

YES NO

ATTACHMENTS:

<p>Click to download</p> <p> draft mins 10-1-15</p>

History

Time	Who	Approval
11/13/2015 3:59 PM	County Administrative Office	Yes

11/12/2015 9:43 AM

County Counsel

Yes

11/10/2015 4:59 PM

Finance

Yes



**DRAFT MEETING MINUTES
BOARD OF SUPERVISORS
AD HOC EMERGENCY MEDICAL SERVICES COMMITTEE
COUNTY OF MONO
STATE OF CALIFORNIA**

MEETING LOCATION Lee Vining Community Center, 296 Mattly Avenue, Lee Vining, CA 93541

October 1, 2015

These minutes are meant as a summary only. A copy of the audio file is available in the Clerk's office upon request

Flash Drive	portable
Minute Orders	none

1:03 PM Meeting Called to Order by Chairman Fesko

Present: Chairman Fesko, Bob Rooks, Mike Geary, Rick Mitchell, Dr. Rick Johnson, Supervisor Fred Stump, Lynda Salcido, Dave Robbins, Frank Frievalt, Rosemary Sachs, Leslie Chapman, Ralph Lockhart.

Absent: Jack Copeland

Break: 2:22 p.m.

Reconvene: 2:30 p.m.

Adjourn: 4:06 p.m.

Pledge of Allegiance led by Chairman Fesko.

1. OPPORTUNITY FOR THE PUBLIC TO ADDRESS THE BOARD

No one spoke.

2. AGENDA ITEMS

A. Symons Presentation

Departments: Clerk of the Board

Advisory presentation by Symons Ambulance to the Ad Hoc EMS Committee.

Note

These draft meeting minutes have not yet been approved by the Ad Hoc EMS Committee

Judd Symons:

- Assumptions he has: maintaining and encouraging the volunteer mechanism in Mono County. There are huge changes coming and engaged support will be needed to keep that going. Keep the volunteers if it comes to that. A provider will need to engage with volunteers.
- Subsidy is necessary, but will need to change what you're doing now. Need 2 or 3 or 4 deployment models rather than the 1 you have now. Need the leadership to simultaneously manage those systems. Subsidized system should have been going.
- EMS is public health function in a public safety environment.
- Conducted an employee profile/survey; had the ability to put 3 CCT units ++ on road within one hour, and staff another 5 ALS units within 3 hours.
- What can Symons bring? 25 year provider can adapt quickly. Treat patients in field. Only exemptions are billing and HR.
- Have a plan to be even more community based that you think you are now.
- Protecting the county: handled within the contract after the RFP.
- Just wants to provide the best possible service and save the County money while doing it.

B. East Fork Presentation

Departments: Clerk of the Board

Advisory presentation by East Fork Ambulance to the Ad Hoc EMS Committee.

Dave Fogerson:

- Handed out copies of presentation (included as additional documents in the agenda). He is the Deputy Fire Chief, also on the Nevada Board of Health Advisory Committee. He is here to give ideas on how East Fork Ambulance does business.

C. Mono County Paramedics Presentation

Departments: Clerk of the Board

Advisory presentation by Mono County Paramedics to the Ad Hoc EMS Committee.

Dan Flynn:

- Handed out copies of his Power Point presentation (included in the agenda). He is the Mono County Paramedic Association Vice President.

D. Question and Answer Panel with Symons, East Fork, and Mono County Paramedics

Departments: Clerk of the Board

Advisory and informational question and answer session with Symons, East Fork, and Mono County Paramedics.

General discussion between the committee and the panel of three presenters. The committee asked clarifying questions about each presenter's information and their general opinions on situations currently existing within Mono County.

Supervisor Fesko:

- Thank you to the three speakers; hopefully it was insightful for committee.

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Note

These draft meeting minutes have not yet been approved by the Ad Hoc EMS Committee

ADJOURN

ATTEST

TIMOTHY E. FESKO
CHAIRMAN

HELEN NUNN
SR. DEPUTY CLERK OF THE BOARD



**OFFICE OF THE CLERK
OF THE BOARD OF SUPERVISORS**

EMS AD HOC AGENDA REQUEST

Print

MEETING DATE	November 19, 2015	DEPARTMENT	
ADDITIONAL DEPARTMENTS			
TIME REQUIRED	30 minutes (10 minute presentation; 20 minute discussion)	PERSONS APPEARING BEFORE THE BOARD	Mike Geary
SUBJECT	Overview of Current EMS system		

AGENDA DESCRIPTION:

(A brief general description of what the Board will hear, discuss, consider, or act upon)

Overview of current Mono County EMS system, including role and involvement of Mono County Paramedics, local fire protection districts, private providers, and others. Continuation of discussion of possible modifications to current system.

RECOMMENDED ACTION:

None (informational only). Provide any desired direction to staff.

FISCAL IMPACT:

CONTACT NAME: Helen Nunn

PHONE/EMAIL: x5534 / hnunn@mono.ca.gov

SUBMIT THE ORIGINAL DOCUMENT WITH ATTACHMENTS TO THE OFFICE OF THE COUNTY ADMINISTRATOR
**PRIOR TO 5:00 P.M. ON THE FRIDAY
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MINUTE ORDER REQUESTED:

YES NO

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History

Time	Who	Approval
11/13/2015 3:59 PM	County Administrative Office	Yes

11/13/2015 3:59 PM

County Counsel

Yes

11/13/2015 4:00 PM

Finance

Yes

EMERGENCY MEDICAL SERVICES AUTHORITY

1930 9th STREET

SACRAMENTO, CA 95814-7043

(916) 322-4336 FAX (916) 324-2875



**Competitive Process for Creating
Exclusive Operating Areas**

February 1997
EMSA #141

COMPETITIVE PROCESS FOR CREATING EXCLUSIVE OPERATING AREAS

Section 1797.224 of Division 2.5 of the Health and Safety Code requires that the EMS Authority delineate a competitive process for awarding exclusive operating areas for emergency response.

If the local EMS agency decides to create exclusive EMS operating areas, a Request for Proposal (RFP) must be developed. An RFP is the awarding agency's description in document form, of specific services to be provided in addition to other contractual requirements. The competitive process for awarding the area must, at a minimum, address the following:

1. Formal advertising of the opportunity to compete for areas.
2. A request for proposal which sufficiently states the requirements of the county and requires adequate documentation of the respondents/ EMS capability and fiscal status.
3. A responders' conference to provide a forum for answering questions.
4. Policies for:
 - a. The submission of responses;
 - b. receiving responses;
 - c. response evaluation;
 - d. response rejection;
 - e. award notification;
 - f. protests and appeals; and
 - g. contract cancellation

When the local EMS agency policies and procedures have been developed, they should be sent to the EMS Authority as part of the local EMS plan submittal. Approval of the process may be secured prior to plan submittal provided it is later incorporated into the plan.

GUIDELINES FOR CREATING EXCLUSIVE EMERGENCY MEDICAL SERVICES OPERATING SERVICE AREAS

I. INTRODUCTION

In the event a local emergency medical services (EMS) agency decides to create one or more exclusive operating areas (EOA) in the development of a local plan, EMS providers within those areas must be selected through a competitive process outlined in Section 1797.224 of Division 2.5 of the Health and Safety Code unless one of the statutory exceptions to that competitive process exists (Section 1797.224). A local EMS agency creates an "exclusive operating area" whenever it restricts operations in an EMS area or subarea defined by the Emergency Medical Services Plan to:

- one or more emergency ambulance services or
- providers of limited advanced life support (LALS) or
- advanced life support (ALS) (Section 1797.85)

The provisions of Section 1797.224 will apply in the majority of instances in the development of a local plan since most local agencies restrict operations to one or more emergency ambulance services or providers within the EMS area or subarea. This is done in an effort to develop system-wide coordination and predictable EMS response initiated from emergency calls received through a central dispatch facility. If the local EMS agency restricts operations to one or more emergency ambulance services or providers within an EMS area or subarea, exclusive operating areas are thereby created.

A competitive process is not required if the local EMS agency implements a plan "that continues the use of existing providers operating within the local EMS area in the manner and scope in which services have been provided without interruption since January 1, 1981" (Section 1797.224). For this exemption to be available, prehospital EMS services within local EMS area or subarea must have been provided by one or more providers in an unchanged and uninterrupted manner since January 1, 1981. Where those facts exist, a local EMS agency may make a finding within the development of their plan that those services by existing providers shall continue.

If the local EMS agency decides to create EOAs, a Request for Proposal (RFP) shall be developed. An RFP is the awarding agency's description, in document form, of specific services to be provided, in addition to other contractual requirements. An awarding agency may be the county or any other county authorized agency.

II. FORMAL ADVERTISING: INVITATIONS

An RFP should be prepared according to the following requirements. RFPs should contain the applicable information enumerated below and any other information necessary for proposal evaluation. The RFP should also include the eligibility and evaluation criteria including the point system to be used in scoring proposals.

- a. The serial number of the RFP
- b. Name and address of the awarding agency.
- c. Date of issuance
- d. Time and place for submission of responses, including disposition of late responses and potential reasons for rejecting all responses.
- e. Time and place of response opening.
- f. Period of time for which response is to remain in effect.
- g. Guarantee, performance and payment bond requirements.
- h. Responder's certification that all statements in the response are true. This shall constitute a warranty, the falsity of which shall entitle the awarding agency to pursue any remedy authorized by law, which shall include the right, at the option of the awarding agency, of declaring any contract made as a result thereof to be void.
- i. When needed for the proposal evaluation, pre-award surveys, or inspection, a requirement that responders state the place(s), including the street address from which the services will be furnished.
- j. Description or specification of services to be furnished in sufficient detail to permit open competition. The awarding agency shall obtain and distribute information from current contractors necessary for fair responses by all eligible providers.
- k. Time, place and method of service delivery.
- l. Citation of, and required responder conformance to, all applicable provisions of law and regulations.
- m. Requirement for each responder to submit a detailed budget and budget narrative wherein line items are identified as yearly or contract period costs.

III. RESPONDERS' CONFERENCE

The awarding agency should conduct a responders' conference at a pre-designated time during the early stage of the process. The date and time of the conference should be stated in the RFP, or arrangements should be made for contacting RFP recipients.

The purpose of the responders' conference is to provide a forum for answering questions. The conference should be the only time that questions are answered regarding the RFP. This will ensure that all prospective responders receive the same information. Questions and answers need not be put in writing. If a written response to a question is provided then all prospective responders must receive a copy of the question and the answer.

IV. PROPOSAL CONTENTS

1. The RFP should require responders to submit a statement of experience which shall include but not limited to the following information:
 - a. Business name and legal business status (i.e., partnership, corporation, etc.) of the prospective contractor.
 - a. Number of years the prospective contractor has been in business under the present business name, as well as related prior business names.
 - b. Number of years of experience the prospective contractor has had in providing the required services.
 - c. Contracts completed during last five (5) years showing year, type of services, dollar amount of services provided, location, and contracting agency.
 - d. Details of any future or refusals to complete a contract.
 - e. Whether the responder holds a controlling interest in any other organization, or is owned or controlled by any other organization.
 - f. Financial interests in any other related business.
 - g. Names of persons with whom the prospective contractor has been associated in business as partners or business associates in the last five (5) years.
 - h. Explanation of any litigation involving the prospective contractor or any principal officers thereof, in connection with any contract for similar services.
 - i. An explanation of experience in the service to be provided or similar experience of principal individuals of the prospective contractor's present organization.
 - j. A list of major equipment to be used for the direct provision of services.
 - k. The awarding agency should request financial information which will disclose the true cost of the proposed operation and the intended source

of all funding related to the provision of services as specified in the RFP. This may include current financial statements, letters of credit, and guarantor letters from related entities, as well as other materials required by the awarding agency.

- l. A list of commitments, and potential commitments which may impact assets, lines of credit, guarantor letters, or otherwise affect the responder's ability to perform the contract.
- m. Business or professional licenses or certificates required by the nature of the contract work to be performed and held by the responder.
- n. An agreement to provide the awarding agency with any other information the county determines is necessary for an accurate determination of the prospective contractor's qualifications to perform services.
- o. Agreement to right of the awarding agency to audit the prospective contractor's financial and other records.

V. SUBMISSION OF PROPOSALS

1. Management of the proposal process should require that:
 - a. Proposals should be submitted so as to be received in the office designated in the RFP document not later than the exact time set for submission of responses.
 - a. Proposals, with required attachments, should be submitted in the format specified by the awarding agency, and signed. The format should provide for the desired sequence of the proposal's content and a model budget.
 - b. Proposals should be filled out, executed, and submitted in accordance with the instructions which are contained in the RFP. If the proposal is not submitted in the format specified, it may be considered only if the responder meets and accepts all the terms and conditions of the RFP.
2. Any proposal received at the office designated in the RFP after the exact time specified for receipt should not be considered unless it is received before award is made and either:
 - a. The awarding agency has set forth an option, to be contained in the RFP document, for acceptance of proposals by registered or certified mail, sent prior to the date specified for the receipt of proposals.
 - b. It is determined that the late receipt was due solely to mishandling by the awarding agency after receipt at the agency.

3. Acceptable evidence to establish whether a proposal is late or meets some of the exceptions listed above may be:
 - a. The date of mailing of a proposal, proposal modification, or withdrawal sent either by registered or certified mail is the U.S. Postal Service postmark on the wrapper or on the receipt from the U.S. Postal Service. If neither postmark shows a legible date, the proposal, modification, or withdrawal should be deemed to have been mailed late.
 - b. The time of receipt at the awarding agency is the time-date stamp of such agency on the proposal wrapper or other evidence of receipt.
4. Any modification or withdrawal of a proposal should be subject to the same conditions cited above. A proposal may also be withdrawn in person by a responder or an authorized representative, provided his/her identity is made known and he/she signs a receipt for the proposal, but only if the withdrawal is made prior to the exact time set for opening of proposals.

VI. RECEIPT AND EVALUATION OF PROPOSALS

1. Upon receipt, each proposal should be noted with a separately identifiable proposal number, the date and time of receipt.
2. All proposals received prior to the time set for opening should be kept unopened and secured in a locked receptacle.
3. An agency official should decide when the time set for submission has arrived and should so declare to those present. All proposals received prior to the time set for opening should be publicly opened and then following recorded and read aloud to the persons present:
 - a. RFP number.
 - b. Submission date.
 - c. General description of service being procured.
 - d. Names of responders.
 - e. Amounts proposed.
 - f. Any other information the awarding agency determines in necessary.
4. If the number of proposals received is less than anticipated, the awarding agency should examine the reasons for the small number of proposals received. The purpose of this examination is to ascertain whether the small number of responses is attributable to an absence of any of the prerequisites of formal advertising.
5. Should administrative difficulties be encountered after proposal opening which may delay contract award beyond the state deadline for contract award, the responders should be notified before that date and the acceptance period extended in order to avoid the need for re-advertisement.

VII. REJECTION OF PROPOSALS

1. Any proposal which fails to conform to the essential requirements of the RFP documents, such as specifications or the delivery schedule should be rejected as non-responsive. Proposals submitted which do not meet the requirements regarding responsibility should also be rejected.

When rejecting a proposal, the awarding agency should notify each unsuccessful responder that the proposal has been rejected.

2. A proposal should not be rejected when it contains a minor irregularity or when a defect or variation is immaterial or inconsequential.

A minor irregularity means a defect or variation which is merely a matter of form and not of substance, such as:

- a. Failure of the responder to return the required number of copies of signed proposals.
 - b. Apparent clerical errors.
3. Immaterial or inconsequential means that the defect or variation is insignificant as to price, quantity, quality, or delivery when contrasted with the total costs or scope of the services being procured.
 4. The awarding agency should give the responder an opportunity to cure any deficiency resulting from a minor informality or irregularity in a proposal or waive such deficiency, whichever is to the advantage of the awarding agency.

IX. CONTRACT PERIODS

1. The complete process (Requests for Proposals) must be repeated at periodic intervals. The period between RFP requests should be established by local EMS agency policy based upon population, initial investment in provision of service and other relevant factors.
2. Contracts should be reviewed annually, at which time they could be renegotiated if this option is included in the contract. A contract may be renewed without re-bidding if this is stated in the RFP.
3. The rate of reimbursement for additional terms let under the contract should be negotiated with the contractor based on the following:
 - a. Actual expenditures by the contractor, as documented during the first contract term and approved by the awarding agency.
 - b. Changes in state program requirements.
 - c. Other reasonable costs or increases in cost over which the contractor has no control.
4. In negotiating costs, the awarding agency should assure that these costs accurately reflect current contract performance and are not inflated to recover

costs which may have been understated by the contractor during the original RFP process.

5. The awarding agency should assure, by audit if necessary, that all cost increases are reasonable and necessary to the continuation of the contract.

X. PROTESTS

The awarding agency should consider any protest or objection regarding the award of a contract, whether submitted before or after the award, provided it is filed within the time period established in the RFP.

Written confirmation of all protests shall be requested from the protesting parties. The protesting party should be notified in writing of the awarding agency's decision on the protest. The notification should explain the basis for the decision.

The decision of the awarding agency regarding the protest may be appealed to higher authority.

XI. CANCELING THE PROCUREMENT PROCESS AFTER OPENING

1. The procurement process may be canceled after opening, but prior to award, when the contracting officer determines in writing that cancellation is in the best interest of the agency for reasons such as those listed below.
 - a. Inadequate, ambiguous, or otherwise deficient specifications were cited in the RFP.
 - b. The services are no longer required.
 - c. All otherwise acceptable proposals received are at unreasonable prices.
 - d. The proposals were not independently arrived at in open competition, were collusive, or were submitted in bad faith.
 - e. The proposals received did not provide competitive adequate to ensure reasonable prices in accordance with local resources or generally accepted prices.
 - f. No proposal is received which meets the minimum requirements of the RFP.
 - g. The awarding agency determines after analysis of the proposals that its needs can be satisfied by a less expensive method.
2. All responders should be notified in writing of the specific reasons when proposals are rejected.



**OFFICE OF THE CLERK
OF THE BOARD OF SUPERVISORS**

EMS AD HOC AGENDA REQUEST

Print

MEETING DATE	November 19, 2015	DEPARTMENT	
ADDITIONAL DEPARTMENTS			
TIME REQUIRED		PERSONS APPEARING BEFORE THE BOARD	Bill VanLente
SUBJECT	EMS Models Workshop		

AGENDA DESCRIPTION:

(A brief general description of what the Board will hear, discuss, consider, or act upon)

Interactive workshop led by Bill Van Lente regarding potential EMS models for Mono County, including review and discussion of information received to date, discussion of details related to specific models, and future steps. Any additional information or attachments will be distributed at the meeting.

RECOMMENDED ACTION:

Provide any desired direction to staff.

FISCAL IMPACT:

CONTACT NAME: Helen Nunn

PHONE/EMAIL: x5534 / hnunn@mono.ca.gov

SUBMIT THE ORIGINAL DOCUMENT WITH ATTACHMENTS TO THE OFFICE OF THE COUNTY ADMINISTRATOR
**PRIOR TO 5:00 P.M. ON THE FRIDAY
32 DAYS PRECEDING THE BOARD MEETING**

SEND COPIES TO:

MINUTE ORDER REQUESTED:

YES NO

ATTACHMENTS:

Click to download
No Attachments Available

History

Time

Who

Approval

10/21/2015 1:12 PM	County Administrative Office	Yes
10/29/2015 9:31 AM	County Counsel	Yes
11/9/2015 7:18 PM	Finance	Yes