CONTRA COSTA HEALTH SERVICES DEPARTMENT
Emergency Medical Services

EMERGENCY AMBULANCE CONTRACT COMPLIANCE SUMMARY
American Medical Response

Date: August 2006

Basic Services

<table>
<thead>
<tr>
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<tr>
<td>I.B.1</td>
<td>Emergency ambulance service provided without interruption, 24 hours per day/7 days per week, 52 weeks per year for entire term of contract</td>
<td>Yes</td>
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<tr>
<td>I.B.3</td>
<td>Four paramedic quick response vehicles (QRV’s) provided 24 hours per day/7 days per week, staffed with at least one paramedic and located in areas approved by contract manager</td>
<td>Yes</td>
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</table>

Clinical And Employee Performance Standards

Continuous Quality Improvement (CQI) Program

<table>
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<tr>
<td>II.A.1</td>
<td>A comprehensive continuous quality improvement (CQI) program, which incorporates all activities and components delineated in its proposal, established and maintained in conjunction with County's CQI program.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.A.2.a</td>
<td>CQI program provides an organized, coordinated, multidisciplinary approach, and included at a minimum those activities included in Exhibit A of the County contract.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.A.2.b</td>
<td>Contractor Medical Director and CQI staff have high levels of interaction and collaborative involvement with County’s EMS Medical Director and CQI staff.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.A.2.c</td>
<td>CQI program incorporates all activities and components delineated in proposal.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>II.A.3</td>
<td>Staff provided to coordinate and provide CQI activities</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.A.3.a</td>
<td>Physician Medical Director participates in County QI activities</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.A.3.b</td>
<td>RN CQI Manager (full time) directs internal and system-integrated QI activities.</td>
<td>Yes</td>
<td>RN position posted. One P/T RN and CCT RN personnel to oversee CQI.</td>
<td></td>
</tr>
<tr>
<td>II.A.3.c</td>
<td>EMS Epidemiologist/Clinical Data Analyst on staff full time and available to work with EMS Medical Director to gather, analyze, and report system wide clinical performance data as specified by County.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.A.3.d</td>
<td>Information Technologist on staff full time maintains functionality of electronic patient care reporting system.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>II.A.3.e</td>
<td>Clinical Education Specialist Paramedic Coordinator on staff full time performs assigned CQI activities.</td>
<td>Yes</td>
<td>Added second Paramedic Specialist while recruiting an RN position.</td>
<td></td>
</tr>
<tr>
<td>II.A.3.f</td>
<td>Paramedic Field Training Coordinator on staff full time develops and conducts required training programs for prehospital personnel.</td>
<td>Yes</td>
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<tr>
<td>II.A.3.g</td>
<td>Regional CES Director available.</td>
<td>Yes</td>
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</tr>
<tr>
<td>II.A.3.h</td>
<td>Field Training Officers have a minimum of 80 compensated hrs/mo. to oversee training/evaluation of new employees and QI activities.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.A.3.i</td>
<td>Experienced field personnel have a minimum of 20 compensated hours/mo</td>
<td>Yes</td>
<td></td>
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<tr>
<td>II.A.4</td>
<td>Implement and coordinate an Integrated Quality Leadership Council to identify, evaluate and recommend solutions to common issues related to an integrated EMS response.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>II.A.5</td>
<td>Endeavor to identify and support implementation of a technological tool to fully integrate electronic records and alignment of data sets system wide, in cooperation with the County and fire services.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>II.A.5.a</td>
<td>Integrated system will allow for quantitative reporting of overall clinical performance, which can be tied to providing integrated EMS system patient care solutions, training and community</td>
<td>No</td>
<td>The Fire districts are in process (date TBD) with the new Zoll ePCR product to collect data that can be incorporated into AMR’s data set.</td>
<td></td>
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</table>
prevention, meaningful data comparison and greater collaborative research opportunities.

| II.A.5.b | Integrated system will provide real-time data to fire agencies for use in fire CQI activities | Yes |

| II.A.6 | Use of benchmarking of Key Clinical Indicators (KCI) and Key Performance Indicators (KPI) as tools for measuring performance | Yes |

| II.A.6.a | Benchmarking and other QI tools used to evaluate and set goals for improving clinical and non-clinical performance. Minimum Benchmarking and KPI/KCI to be used are identified in Exhibit A of contract. Reports detailing progress provided according to schedule approved by Contract Manager. | Yes |

| II.A.6.b | Data developed through CQI process provided to EMS Agency for use in evaluating EMS system performance and in setting system improvement goals. | Yes |

| II.A.6.c | County approved benchmarking tools developed during the Contract period incorporated into CQI process | Yes |

| II.A.6.d | Initiate and actively participate in Prehospital research projects | Yes |

**Personnel**

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<tr>
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<tr>
<td>II.B.1.a</td>
<td>Copies of all current and valid licenses, certifications, and/or accreditations of all emergency medical personnel performing services under this contract on file at all times</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.1.b</td>
<td>All ambulance personnel are currently credentialed at all times when assigned to provide ambulance services</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.1.c</td>
<td>List of currently employed paramedics and EMT-I's provided and updated whenever a paramedic or EMT-I leaves or enters Contractors employ.</td>
<td>Yes</td>
<td></td>
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<tr>
<td></td>
<td>Personnel list shall include, at a minimum, name, address, phone, CPR expiration date, California drivers license</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proposal Pg 22</td>
<td>Personnel list for paramedics shall also include Paramedic license number, expiration date and ACLS, PEPP, BTLS/PHTLS expiration dates</td>
<td>Yes</td>
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<tr>
<td>II.B.2.a</td>
<td>Paramedic personnel currently licensed as a paramedic in California</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.2.b</td>
<td>Paramedic personnel currently accredited in Contra Costa County</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.2.c</td>
<td>Paramedic personnel currently certified in Advanced Cardiac Life Support (ACLS) according to the American Heart Association</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.2.d</td>
<td>Paramedic personnel currently certified in Basic Trauma Life Support (BTLS) or Prehospital Trauma Life Support (PHTLS) according to the American College of Surgeons. New paramedic employees assigned to work with a currently BTLS/PHTLS certified partner obtain certification within 3 months.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.2.e</td>
<td>Paramedic personnel currently certified in Pediatric Education for Prehospital Professionals (PEPP). New paramedic employees assigned to work with a currently BTLS/PHTLS certified partner obtain certification within 3 months.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.2.f</td>
<td>Paramedic personnel currently certified in cardiopulmonary resuscitation (CPR) equivalent to American Heart Association’s Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care at the Healthcare Provider level and automated external defibrillator (AED) utilization.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.2.g</td>
<td>Paramedic personnel have current California driver’s license, ambulance driver’s license and Medical Examiner certificate</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.2.h</td>
<td>Paramedic personnel currently certified as an emergency vehicle operator according to the Emergency Vehicle Operator Course (EVOC) or equivalent training.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.3.a</td>
<td>EMT personnel currently certified as an EMT-I in California</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.3.b</td>
<td>EMT personnel have current California driver’s license, ambulance driver’s license and Medical Examiner certificate</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.B.3.c</td>
<td>EMT personnel currently certified in cardiopulmonary resuscitation (CPR) equivalent to American Heart Association’s Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care at the Healthcare Provider level and automated external defibrillator (AED) utilization.</td>
<td>Yes</td>
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<tr>
<td>II.B.3.d</td>
<td>EMT personnel currently certified as an emergency vehicle operator according to the Emergency Vehicle Operator Course (EVOC) or equivalent training.</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>II.B.4.a</td>
<td>All field personnel oriented before assignment to respond to emergency medical requests. Orientation to include, at a minimum, Contractor’s policies and procedures; EMS system overview; EMS policies and procedures; radio communications; map reading skills including key landmarks, routes to hospitals and other major receiving facilities within the county and in surrounding areas; and ambulance and equipment utilization and maintenance.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>II.B.4.b</td>
<td>Orientation program shall include field training and evaluation by Contractor’s Field Training Officers (FTO’s). The field-training component shall be a minimum of seventy-two (72) hours for paramedics and forty-eight (48) hours for EMT-I’s.</td>
<td>Yes</td>
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**Field Supervision**

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<tr>
<td>II.C</td>
<td>One Field Supervisor on-duty in each area of the county (west, east, and central) providing 24-hour coverage, 7 days a week. Field Supervisors authorized to act on behalf of the Contractor in all field operational matters.</td>
<td>Yes</td>
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**Leadership and Supervisory Training**

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## II.D.1
Educational, developmental and informational courses and materials to assist interested employees selected by Contractor in preparing themselves to successfully compete for promotions or other internal work opportunities provided at no cost to employee.  
Yes

## II.D.2
On-going training and development programs for managers and supervisors provided at no cost to employee.  
Yes

### Quality Improvement Hotline

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<tr>
<td>II.E</td>
<td>Establish a QI Hotline giving customers and system participants the ability to leave commendations or suggestions for service improvements on a voice mailbox. The hotline number will be publicized at local healthcare facilities, First Responder stations, and public safety agencies. Members of the Contractor’s QI/Leadership Team are automatically notified via pager of any incoming calls. Incidents that require feedback are attended to by the end of the next business day.</td>
<td>Yes</td>
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### Confidentiality and HIPAA

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<tr>
<td>II.F</td>
<td>Agree to comply with requirements of State and federal law, including the requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, as applicable and take appropriate steps to maintain confidentiality of patient data used in quality improvement processes.</td>
<td>Yes</td>
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## Continuing Education (CE) Program

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<td>II.G</td>
<td>Establish a regional EMS training program within the County. Through this program, provide a full spectrum of continuing education opportunities to both Contractor’s and Fire Service personnel, as specified further in contract section VII.D., including ACLS, PHTLS, and PEPP. Contractor’s CE shall include the use of performance and outcome indicators.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>II.G.1</td>
<td>Training programs designed to meet County contract requirements for paramedics and other educational programs include those requirements listed in Exhibit B of contract</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>II.G.2</td>
<td>Training program may include physician-approved internet based CE.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>II.G.3</td>
<td>Program content meets ongoing education requirements for Contra Costa County and the State of California licensure/certification.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>II.G.4</td>
<td>Works with fire service agencies and Northern California Training Institute (NCTI) staff to accredit Contractor’s personnel and Fire Service personnel as instructors for the various class offerings at NCTI. Contractor will remunerate those instructors or their agencies as may be agreed.</td>
<td>Yes</td>
<td>Instructor classes on NCTI schedule</td>
</tr>
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## Character Competence and Professionalism of Personnel

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<tr>
<td>II.H.1</td>
<td>Requires professional and courteous conduct and appearance at all times from employees. Addresses and corrects any occasional departure from this standard of conduct.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>II.H.2</td>
<td>Assures that all employees in the performance of their work are competent and holders of appropriate licenses and permits in their respective professions and conducts a criminal investigation for any criminal record.</td>
<td>Yes</td>
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### ALS Ambulance Services Accreditation

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<tr>
<td>II.1</td>
<td>By September 1, 2006, attain Accreditation as an “ALS Ambulance Service” through the Commission on Accreditation of Ambulance Services (CAAS) or comparable organization. Maintain accreditation throughout the Contract term.</td>
<td>Yes</td>
<td></td>
<td>CAAS project steps in process for a December date. Sight visits are required at the new OPS Deployment Center. We moved into new location August 28, 2006.</td>
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### Diversity Awareness

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<tr>
<td>II.J.1</td>
<td>Adopt and enforce policies and practices to assure equal employment opportunity.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>II.J.2</td>
<td>Participate in the development of a cultural-competency training program and materials for emergency responders. Contractor shall assure employees possess culturally appropriate skills when interacting with the diverse County population.</td>
<td>Yes</td>
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### Work Schedules and Human Resource Issues

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<tr>
<td>II.K.1</td>
<td>Conducts employment matters with its employees including managing personnel and resources fairly and effectively in a manner that ensures compliance with this Contract.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>II.K.2</td>
<td>Fulfill all employee commitments as set forth in Proposal and Supplemental Information and Commitment.</td>
<td>Yes</td>
<td></td>
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<tr>
<td>III.B.1</td>
<td>Subject to Section III.B.2, all ambulances providing emergency ambulance services under this Contract shall be staffed and equipped to provide advanced life support (ALS) care. A paramedic shall be the primary caregiver for all patients, emergent and non-emergent, and shall accompany patients in the back of the ambulance in accordance with current EMS policy.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>III.B.1.a</td>
<td><strong>ERZ A</strong>: Staff ambulances assigned to ERZ A with a minimum of two (2) paramedics for responses to requests originating in ERZ A. If an ambulance staffed with a single paramedic is dispatched to respond to a location within ERZ A, a second paramedic shall be immediately dispatched to that incident. Reported “arrival on scene time” shall be the arrival time of the second paramedic.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>III.B.1.b</td>
<td><strong>ERZ B</strong>: Initially staff ambulances with a minimum of two (2) paramedics, but, subject to the approval of the Contract Manager, may phase in one (1) paramedic and one (1) EMT-I staffing for responses to requests originating in ERZ B.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>III.B.1.c</td>
<td><strong>ERZ C</strong>: Staff ambulances with a minimum of one (1) paramedic and one (1) EMT for responses to requests originating in ERZ C.</td>
<td>Yes</td>
<td></td>
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<tr>
<td>III.B.1.d</td>
<td><strong>ERZ D</strong>: Staff ambulances with a minimum of one (1) paramedic and one (1) EMT for responses to requests originating in ERZ D.</td>
<td>Yes</td>
<td></td>
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<tr>
<td>III.B.1.d</td>
<td><strong>ERZ E</strong>: Staff ambulances primarily assigned to ERZ E with a minimum of two (2) paramedics for responses to requests originating in ERZ E.</td>
<td>Yes</td>
<td></td>
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<tr>
<td>III.B.2</td>
<td>May send Basic Life Support (BLS) units staffed with two (2) EMT’s to requests for multi-unit response and to any calls in which a County designated Communications Center determines</td>
<td>Yes</td>
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</table>
BLS response is appropriate according to emergency medical dispatch protocols and procedures approved by County.

## Response Time Performance Standards

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<tr>
<td>III.C</td>
<td>Response time on requests for paramedic emergency medical service originating from within Contractor’s service area shall meet the response time standard as measured within any consecutive thirty (30) day period.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>III.C.1a</td>
<td><strong>Priority 1 (Code 3) – ERZ A</strong> – Ten minutes and zero seconds (10:00) to calls originating in ERZ A, except for rural-designated areas as set forth in <a href="#">Exhibit C</a>.</td>
<td>Yes</td>
<td></td>
<td>Response Time Compliance (95% Requirement): ERZ A: 95.95%</td>
</tr>
<tr>
<td>III.C.1b</td>
<td><strong>Priority 1 (Code 3) – ERZ B, C, D, E</strong> – Eleven minutes forty-five seconds (11:45) to calls originating in ERZ’s B, C, D, and E, except for rural-designated areas as set forth in <a href="#">Exhibit C</a>.</td>
<td>Yes</td>
<td></td>
<td>Response Time Compliance (90% Requirement): ERZ B: 96.28%  ERZ C: 95.26%  ERZ D: 96.65%  ERZ E: 94.90%</td>
</tr>
<tr>
<td>III.C.1c</td>
<td><strong>Priority 1 (Code 3) – ERZ E</strong> – Sixteen minutes forty-five seconds (16:45) to calls in rural-designated areas of Bethel Island and Discovery Bay. A map of these areas is attached hereto as <a href="#">Exhibit I</a> and incorporated herein by this reference.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>III.C.1d</td>
<td><strong>Priority 1 (Code 3) – All Zones</strong> – Twenty minutes and zero seconds (20:00) to calls within other rural designated areas as set forth in <a href="#">Exhibit C</a>.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>III.C.1e</td>
<td><strong>Priority 1 (Code 3) – ERZ E</strong> – Ambulance or QRV response within ten minutes and zero seconds (10:00) to calls originating in non-rural designated areas of ERZ E.</td>
<td>Yes</td>
<td></td>
<td>Response Time Compliance (90% Goal): ERZ E (10 minute clock): 89.16%</td>
</tr>
<tr>
<td>III.C.2</td>
<td><strong>Priority 2</strong> – (To be defined) – Respond a paramedic ambulance to non-life threatening Priority 2 emergency ambulance requests with a maximum response time of fifteen minutes and zero seconds (15:00) in designated urban/suburban areas and a maximum response time of thirty minutes and zero seconds (30:00) in designated rural areas. Immediately notifies the County dispatch agency if the response time exceeds the established maximum.</td>
<td>N/A</td>
<td></td>
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</tbody>
</table>
III.C.3

**Priority 3 – (Current Code 2)** – Respond a paramedic ambulance to all non-emergency ambulance requests with a maximum response time of thirty minutes and zero seconds (30:00) in designated urban/suburban areas and a maximum response time of forty-five minutes and zero seconds (45:00) in designated rural areas. Immediately notify the County dispatch agency if the response time will exceed the maximums.

<table>
<thead>
<tr>
<th>Documentation of Response Times</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Contract Section</strong></td>
</tr>
<tr>
<td>III.G</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Response Time Performance Report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Contract Section</strong></td>
</tr>
<tr>
<td>III.H</td>
</tr>
<tr>
<td>III.H.1</td>
</tr>
<tr>
<td>III.H.2</td>
</tr>
</tbody>
</table>

### Work and Services

<table>
<thead>
<tr>
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<th>Description</th>
<th>Meets Compliance</th>
<th>Does Not Meet Compliance</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>III.K</td>
<td>Complies with all applicable Federal, State and local laws and regulations, and County EMS policies, procedures and protocols.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Paramedic Quick Response Vehicles (QRV’s)

<table>
<thead>
<tr>
<th>Contract Section</th>
<th>Description</th>
<th>Meets Compliance</th>
<th>Does Not Meet Compliance</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>III.L.3</td>
<td>Does not bill any patient for services that do not result in a transport.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Initial Deployment Plan

<table>
<thead>
<tr>
<th>Contract Section</th>
<th>Description</th>
<th>Meets Compliance</th>
<th>Does Not Meet Compliance</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>III.M</td>
<td>Staff and deploy a minimum of six hundred seventy-two (672) QRV unit hours per week for the term of this Contract. Compliance measured monthly.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>III.M</td>
<td>Contractor shall staff and deploy a minimum of four thousand, twenty-four (4,024) paramedic ambulance unit hours per week throughout the term of this Contract. Compliance measured monthly.</td>
<td>No</td>
<td></td>
<td>Total monthly ALS unit hours deployed were 17,749. Total weekly ALS unit hours deployed were 4004. Paramedic staffing levels dropped due to FD hiring. Replacement personnel have been hired and the balance 20 hours per week will be staffed for September.</td>
</tr>
</tbody>
</table>
### III.M
Contractor shall maintain on file with County a current deployment plan specifying ambulance post locations by time of the day and day of the week. Contractor shall provide County a monthly report specifying deviations from the deployment plan on file. Contractor acknowledges and agrees with the goals of the EMS system to achieve the response time standards specified herein and to achieve timely responses in each community served. Contractor shall therefore endeavor to deploy ambulance resources in a manner consistent with this goal.

| III.M | Contractor shall maintain on file with County a current deployment plan specifying ambulance post locations by time of the day and day of the week. Contractor shall provide County a monthly report specifying deviations from the deployment plan on file. Contractor acknowledges and agrees with the goals of the EMS system to achieve the response time standards specified herein and to achieve timely responses in each community served. Contractor shall therefore endeavor to deploy ambulance resources in a manner consistent with this goal. | Yes |  |

### Stand-by

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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>III.N</td>
<td>Provides, at no charge to County or requesting agency, stand-by services at the scene of an emergency incident within its service area when directed by a County designated Communications Center. Advance approval from Contract Manager for stand-by periods exceeding eight (8) hours. Immediately notifies requesting agency Incident Commander when a Stand-by exceeding one-hour may limit ability to meet response time standards for the impacted ERZ and notifies Contract Manager in writing by the following business day.</td>
<td>Yes</td>
<td></td>
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</tr>
</tbody>
</table>

### Disaster Transport Units

<table>
<thead>
<tr>
<th>Contract Section</th>
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<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>III.O</td>
<td>Acquires, insures, maintains, fully stocks, equips and deploys six (6) reserve transport-capable vehicles to be staffed by Fire Agency personnel in pre-defined and urgent situations. Units placed in locations determined by the Contract Manager and in accordance with Contractor’s Proposal. Contract Manager may direct Contractor to provide equivalent value to the County consistent with applicable State and</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Federal laws and regulations in lieu of said reserve ambulances as identified in Exhibit E. County and Contractor will work to establish locations for units, and policies and procedures for use.

<table>
<thead>
<tr>
<th>AMBULANCE VEHICLES AND EQUIPMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Vehicles</strong></td>
</tr>
<tr>
<td>Contract Section</td>
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<tr>
<td>------------------</td>
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<tr>
<td>IV.A</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Vehicle Markings</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract Section</td>
</tr>
<tr>
<td>------------------</td>
</tr>
<tr>
<td>IV.B.1</td>
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<tr>
<td>IV.B.2</td>
</tr>
</tbody>
</table>
### Vehicle Maintenance

<table>
<thead>
<tr>
<th>Contract Section</th>
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</tr>
</thead>
<tbody>
<tr>
<td>IV.C</td>
<td>Maintains its vehicles in a good working order, consistent with the manufacturer's specifications. In addition, detailed records are maintained as to work performed, costs related to repairs, and operating and repair costs analyses where appropriate. Repairs are accomplished and systems are maintained so as to achieve at least the industry norms in vehicle performance and reliability.</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

### General Equipment

<table>
<thead>
<tr>
<th>Contract Section</th>
<th>Description</th>
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</tr>
</thead>
<tbody>
<tr>
<td>IV.D.1</td>
<td>All ambulances carry all emergency supplies and equipment identified in the County Ambulance Equipment and Supply list. In addition, Contractor shall provide all equipment identified in Contractor’s Proposal, as approved by the Contract Manager.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>IV.D.2</td>
<td>Maintains vehicles, equipment, and supplies in a clean, sanitary, and safe mechanical condition at all times.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>IV.D.3</td>
<td>Agrees that equipment and supply requirements may be changed with the approval of Contract Manager due to changes in technology.</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

### Failure To Meet Minimum In-Service Equipment and Supply Requirements

<table>
<thead>
<tr>
<th>Contract Section</th>
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<th>Meets Compliance</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>IV.E</td>
<td>County may inspect Contractor's ambulances at any time, without prior notice. Any ambulances that fail to meet the minimum in-service requirements are subject to penalties.</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>
requirements contained in the County Ambulance Equipment and Supply list may immediately be removed from service until the deficiency is corrected if the missing item is deemed a critical omission and subject Contractor to a per-incident penalty as described in Exhibit D.

<table>
<thead>
<tr>
<th>Equipment Exchange and Replacement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Contract Section</strong></td>
</tr>
<tr>
<td>IV.F.1</td>
</tr>
<tr>
<td>IV.F.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMUNICATIONS EQUIPMENT AND DISPATCH</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Dispatch Center</strong></td>
</tr>
<tr>
<td><strong>Contract Section</strong></td>
</tr>
<tr>
<td>V.A.</td>
</tr>
<tr>
<td>Contract Section</td>
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<tr>
<td>------------------</td>
</tr>
<tr>
<td>V.A.1</td>
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<tr>
<td>V.E.4</td>
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</tbody>
</table>

**Dispatcher Preparedness**

<table>
<thead>
<tr>
<th>Contract Section</th>
<th>Description</th>
<th>Meets Compliance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>V.C</td>
<td>Adequately trains and prepares emergency ambulance dispatchers to process emergency medical requests for service. Dispatchers are given a company orientation as well as a thorough orientation to the County EMS system before being assigned to operate as part of the ambulance dispatch system.</td>
<td>Yes</td>
<td></td>
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</tr>
</tbody>
</table>

**Dispatch Evaluation**

<table>
<thead>
<tr>
<th>Contract Section</th>
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<th>Meets Compliance</th>
<th>Does Not Meet Compliance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>V.D.</td>
<td>Implements an on-going program for the evaluation of dispatch operations, education and training of dispatchers, and problem identification and resolution.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Ambulance Communication Equipment**

<table>
<thead>
<tr>
<th>Contract Section</th>
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<th>Does Not Meet Compliance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>V.E.1</td>
<td>Equips all ambulances and supervisory vehicles with radio equipment for communications with Contractor’s dispatch center on Contractor’s</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>V.E.2</td>
<td>V.E.3</td>
<td>V.E.3.a</td>
<td>V.E.3.c</td>
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<tr>
<td>---</td>
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<tr>
<td>radio channels.</td>
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<tr>
<td>Equips all supervisory vehicles with radio equipment suitable for operation on the California On-Scene Emergency Coordination Radio (CALCORD) System and shall maintain a cache of 10 portable CALCORD radios with vehicle chargers ready at all times for immediate deployment on ambulance units that may be used for mutual aid.</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.2</td>
<td>Equips all supervisory units and the operations center with satellite telephones to allow for uninterrupted ability to communicate with designated agencies in the event of a critical system failure or catastrophic event.</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.3</td>
<td>Equips all ambulances and supervisory vehicles with 4-channel radios for communication on County's MEDARS radio system and with cellular telephones for ambulance to base hospital communications.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.3</td>
<td>Equips all ambulances and supervisory vehicles with two-way vehicular or portable radio equipment for communications with fire or other emergency response agencies.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.3.a</td>
<td>Radio frequencies and communications equipment provided by the County used only for emergency medical response within Contra Costa County or as directed by a County designated Communications Center or in compliance with policies and protocols established by County.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.3.c</td>
<td>Communications equipment used for ambulance-to-hospital communications are configured so that personnel actually providing patient care are able to directly communicate with base or receiving hospital staff about the patient.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.3.d</td>
<td>Approved radio equipment are installed in conformance with existing County policies prior to assignment of a vehicle to an emergency response area. Installations and removals done at Contractor's expense.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.3.e</td>
<td>Obtains a certificate of inspection of approved radio equipment by County following installation and on an annual basis thereafter and shall make vehicles available for inspection of County owned radios upon reasonable request of County. Contract Manager and County Communications Division may adopt alternate procedures.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.3.g</td>
<td>County owned radios damaged due to accidents, malicious mischief, and acts of God, are repaired or replaced at County's option by County, for which Contractor shall pay County's actual cost of repair or replacement, or by Contractor with County’s prior approval. Equipment shall remain the property of the County.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.3.h</td>
<td>Operates communications equipment in conformance with all applicable rules and regulations of the Federal Communication Commission, and in conformance with all applicable County rules and operating procedures.</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>V.E.3.i</td>
<td>County Communications Director has approved all radio equipment other than Contractor’s internal company system</td>
<td>Yes</td>
<td></td>
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</tbody>
</table>

**Hospital Communications Network**

<table>
<thead>
<tr>
<th>Contract Section</th>
<th>Description</th>
<th>Meets Compliance</th>
<th>Does Not Meet Compliance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>V.F</td>
<td>Provides at its dispatch center all equipment and software necessary for participation in County-designated hospital communication network and assures that all dispatchers are trained and familiar with hospital communications network. Dispatchers notify ambulance personnel and EMS Agency staff when alerted through the hospital communications network that a hospital’s ability to accept patients in its emergency department has changed.</td>
<td>Yes</td>
<td></td>
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</tbody>
</table>

**RECORDS, REPORTS, AUDITS, INSPECTIONS**

**Data and Reporting Requirements**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>VI.A</td>
<td>Provides detailed operations, clinical and administrative data in a manner that facilitates its retrospective analysis.</td>
<td>Yes</td>
<td></td>
<td></td>
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</tbody>
</table>
## Dispatch Computer

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>VI.B</td>
<td>Dispatch computer utilized by Contractor includes security features preventing unauthorized access or retrospective adjustment, and full audit trail documentation.</td>
<td>Yes</td>
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</tbody>
</table>

## Records

<table>
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<tr>
<th>Contract Section</th>
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</thead>
<tbody>
<tr>
<td>VI.C</td>
<td>Completes, maintains and provides to County if requested, adequate records and documentation to demonstrate its performance compliance and to aid County in improving, modifying, and monitoring the EMS system as a whole.</td>
<td>Yes</td>
<td></td>
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</tbody>
</table>

## Electronic Patient Care Report (PCR) System

<table>
<thead>
<tr>
<th>Contract Section</th>
<th>Description</th>
<th>Meets Compliance</th>
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</tr>
</thead>
<tbody>
<tr>
<td>VI.D</td>
<td>Field personnel use a computerized patient care reporting system, approved by Contract Manager for patient documentation on EMS system responses including patient contacts, cancelled calls, and non-transport.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.a</td>
<td>PCR system contains features to maximize accuracy of PCR documentation</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.b</td>
<td>PCR system contains ability to auto-populate fields</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.b</td>
<td>The PCR is accurately completed to include all information listed in Section 100170 of the California Code of Regulations, and information shall be distributed according to established EMS Policies and Procedures.</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.c</td>
<td>PCR system contains ability to print legible PCR’s at receiving facilities</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.d</td>
<td>PCR system contains ability to support real time reporting and immediate access to PCR’s</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.e</td>
<td>PCR system uses a highly secure and encrypted connection that meets Health Insurance Portability and Accountability Act (HIPAA) compliance in all electronic information exchanges</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.f</td>
<td>PCR system contains ability to download EKG strips from cardiac monitors and transmit data</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.g</td>
<td>PCR system contains ability to import data from electronic monitoring equipment</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.h</td>
<td>PCR system contains ability to use the system as a communication conduit in the field</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.i</td>
<td>PCR system contains ability to map data points to the National Highway and Traffic Safety Administration data set (NEMSIS) and the California Emergency Medical Services Authority data set (CEMSIS) for compliance with federal and state recommendations, for clinical and demographic reporting, and for data comparison with other EMS systems</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.j</td>
<td>PCR system is easily queried to produce ad hoc reports specific to clinical classifications</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.1.k</td>
<td>PCR system compiles clinical data into a data warehouse that facilitates research and study of patient care encounters through out Contractor’s organization</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.2a</td>
<td>Develop and implement in ePCR, automatic e-mail notifications to Contractor whenever there is a significant “real-time” deviation from protocol in the field</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.2.b</td>
<td>Develop and implement in ePCR, ability to automatically create and electronically submit to Contractor daily reports of patient vital signs outside the normal range for chart audit</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.2.c</td>
<td>Develop and implement in ePCR, ability to automatically notify Contractor’s critical incident stress management team leader of critical incidents for immediate response</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.2.d</td>
<td>Develop and implement in ePCR, ability to track and report pre-determined preventable injuries and illnesses community-wide in order to target injury and illness prevention activities</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>VI.D.2.e</td>
<td>Develop and implement in ePCR, ability to automatically send customer satisfaction surveys within three (3) days of service.</td>
<td>Yes</td>
<td></td>
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</tbody>
</table>

Provides County with reports of customer satisfaction surveys within three (3) days of service.
Develop and implement in ePCR, a revised ePCR interface to ensure a “user-friendly” data collection system

Provides other data points which may be reasonably requested, including any needed modifications to support EMS system data collection

### Patient Care Report Data Submission Required

<table>
<thead>
<tr>
<th>Contract Section</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>VI.E.1</td>
<td>Provides to County, within twenty-four (24) hours of each ambulance response, PCR in computer readable format approved by County</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.E.1a</td>
<td>PCR’s provided to County contain all information documented on original PCR and are submitted for all EMS system responses including patient contacts, cancelled calls, non-transport</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.E.1b</td>
<td>Data points collected include all items identified by County</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.E.2</td>
<td>Identifies PCR’s for patients meeting trauma triage criteria</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Reports Required

<table>
<thead>
<tr>
<th>Contract Section</th>
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<tbody>
<tr>
<td>VI.F</td>
<td>Provides, within ten (10) days after the first of each calendar month, reports dealing with performance during the preceding month related to clinical, operational and financial performance. Documents and reports in writing and in a format required by the Contract Manager. Response time compliance and customer complaints with resolutions are reported monthly</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.1.a</td>
<td>Clinical reports to include continuing</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.1.b</td>
<td>Clinical reports to include summary of clinical/service inquiries and resolutions</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.1.c</td>
<td>Clinical reports to include summary of interrupted calls due to vehicle/equipment failures</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.1.d</td>
<td>Clinical reports to include a list of trauma transports, by city and by hospital, including all times necessary to calculate each and every response time, on-scene time, and transport to hospital time</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.2.a</td>
<td>Operational reports to include Calls and transports, by priority, by ERZ</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.2.b</td>
<td>Operational reports to include a list by ERZ of each call where a BLS ambulance was dispatched when an ALS ambulance should have responded</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.2.c</td>
<td>Operational reports to include a list by ERZ of each call where there was a failure to properly record all times necessary to determine the response time and or transport to hospital time</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.2.d</td>
<td>Operational reports to include a list of mutual aid responses and requests</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.2.e</td>
<td>Operational reports to include number of paramedic ambulance hours deployed</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.3.a</td>
<td>Response time reports to include a list by ERZ of each emergency call dispatched for which Contractor did not meet the response time standard</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.3.b</td>
<td>Response time reports to include a list by ERZ of responses cancelled en route</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.3.c</td>
<td>Response time reports to include a list by ERZ of exception requests and resolution</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.4</td>
<td>Within 10 working days following the last day of each month, provides ambulance dispatch records to County in computer readable format specified by the Contract Manager for all ambulance responses originating from requests by County designated Communications Centers. Records include all data elements identified in Exhibit F</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.5.a</td>
<td>Community/Governmental Affairs reports to include number, location, and outcome of conducted community education events</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.5.b</td>
<td>Community/Governmental Affairs reports to include PR activities, first responder recognition</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
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<tr>
<td>VI.F.5.c</td>
<td>Community/Governmental Affairs reports to include government relations contact report</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VI.F.6</td>
<td>Provides County with such other reports and records as may be reasonably required by Contract Manager</td>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td><strong>DEVELOPMENT OF AND INTEGRATION WITH FIRST RESPONDER PROGRAMS</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>VII.A</strong></td>
<td>Supports the development and integration of the fire first response component of the EMS system and cooperates and supports the expansion of paramedic first response</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>VII.B</strong></td>
<td>Insures that its personnel work professionally and collaboratively with fire first responders in the transition of patient care at the scene</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td><strong>VII.C</strong></td>
<td>Implements policies to facilitate scheduling time on ambulances to fulfill paramedic training, internship, and accreditation requirements for firefighter paramedics working in Contra Costa County</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td><strong>VII.D.1</strong></td>
<td>Offers in-county paramedic training for 75 firefighters employed within the contract service area during the first three years of the Contract and a minimum of 100 firefighters during the full term of the Contract. Paramedic training is provided at no cost to County or fire agencies for tuition.</td>
<td>Yes</td>
<td></td>
<td>Paramedic Scholarship opportunity and contact person has been communicated to each Fire Department Chief and through the EMS/FD Training Consortium.</td>
</tr>
<tr>
<td><strong>VII.D.2</strong></td>
<td>All continuing education (CE) programs are made available to Contra Costa fire personnel on a comparable basis to Contractor’s personnel. No fees charged Fire personnel exceed fees charged Contractor’s personnel. Fire personnel have access to enrollment on the same basis as Contractor’s personnel.</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td><strong>VII.D.3</strong></td>
<td>Designated single employee as contact person/liaison for the fire agencies within the Service Area</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td><strong>VII.D.4</strong></td>
<td>Established a mechanism to exchange on a one-for-one basis medical supplies and equipment supplied by a fire first responder agency in connection with patient transport</td>
<td>Yes</td>
<td></td>
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<tr>
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<tr>
<td>VII.D.5</td>
<td>Provides pre-arranged transportation service to return firefighters who accompany an ambulance to the hospital promptly to their engine companies</td>
<td>Yes</td>
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</table>

**HEALTH STATUS IMPROVEMENT AND COMMUNITY EDUCATION**

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<thead>
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</table>
| VIII.A           | Provides the County EMS Agency each year with (1) a written plan of activities for the coming year and (2) a summary of the year’s accomplishments. Endeavors to carry out activities in cooperation with existing healthcare and health promotion organizations, local public safety agency, and other community organizations. | Yes | | *Report due June 30 – Contractor has requested extension to September 30*

**Community Outreach Coordinator**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>VIII.B</td>
<td>Employs a full-time Community Outreach Coordinator whose primary responsibilities are to work with County and community organizations in carrying out Contractor’s health status improvement and community education program</td>
<td>Yes</td>
<td></td>
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</table>

**Community CPR Training**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>VIII.C</td>
<td>Health status improvement and community education program includes cardio-pulmonary resuscitation (CPR) with the purpose of</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VIII.C.1</td>
<td>Develops an outreach program for each supervisory district to recruit residents to attend CPR classes</td>
<td>Yes</td>
<td>To date CPR classes offered in each district: District 1: 7 District 2: 6 District 3: 6 District 4: 6 District 5: 4</td>
<td></td>
</tr>
<tr>
<td>VIII.C.2</td>
<td>Conducts an outreach program to expand the number of citizens interested in obtaining CPR training</td>
<td>Yes</td>
<td>To date 436 citizens attended AMR CPR classes.</td>
<td></td>
</tr>
<tr>
<td>VIII.C.3</td>
<td>Conducts a minimum of 24 CPR classes each year at different locations throughout the County offered to the public without charge</td>
<td>Yes</td>
<td>30 classes completed to date.</td>
<td></td>
</tr>
<tr>
<td>VIII.C.4</td>
<td>Provides train-the-trainer courses to persons willing to provide CPR training to the public without charge</td>
<td>Yes</td>
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### Public Access Defibrillation (PAD) Program

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<tbody>
<tr>
<td>VIII.D</td>
<td>Health status improvement and community education program includes a PAD program to promote public access defibrillation and to provide defibrillators at public locations throughout County</td>
<td>Yes</td>
<td></td>
<td>2 AMR/County EMS PAD informational and application packets mailed this month. To date AMR has mailed 46 packets to perspective sites. For the month of July AMR received 2 applications requesting an AED donation. To date AMR has received a total of 8 applications requesting an AED for donation.</td>
</tr>
<tr>
<td>VIII.D.1</td>
<td>Identifies candidate organizations and locations where public access defibrillation would be beneficial</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VIII.D.2</td>
<td>Works with candidate organizations to develop organizational PAD programs, including training appropriate staff</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
VIII.D.3 | Provides at Contractor’s cost a minimum of 25 AEDs each year to selected organizations to be used in their PAD program, for a total of 125 units for the initial term of the contract, or 225 if the contract is extended. Each provided defibrillator includes a minimum three-year warrantee and includes appropriate installation and mounting for public access | Yes | To date: AMR donated 9 AED cabinets  
AMR donated 9 AED  
Note: With the new AHA, the vendor, Medtronic’s is on back-order for equipment.

### Health Status Improvement Project

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>VIII.E</td>
<td>Health status improvement and community education program includes at least one project each year in addition to the above described CPR and PAD programs that demonstrably improves the health status in the community</td>
<td>Yes</td>
<td></td>
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</tr>
</tbody>
</table>
| VIII.E.1         | Health status improvement programs targeted to “at risk populations” include but are not limited to: seat belt use, child safety seat use, bike safety program, participation in NHTSA Safe Communities Program, CPR training, 911 awareness, gun safety, hunting safety, drowning prevention, equestrian accident prevention, senior safety program, home hazard inspection program | Yes | | - To date educated 436 citizens on 9-1-1 awareness  
For the month of August:  
- AMR educated 60 senior citizens about medical emergency preparedness.  
- AMR donated 80 “Vial of Life” for senior emergency preparedness education. |
<p>| VIII.E.2         | Impact of the annual health status improvement project is statistically demonstrable, to include selecting indicators that are used to measure the process and outcomes of an intervention strategy for health improvement, collecting and analyzing data on those indicators, and collecting and analyzing data on those indicators of an intervention and the contributions of participating entities | Yes | | |
| VIII.E.2.a       | Project steps analyze the community’s health issues | Yes | | |
| VIII.E.2.b       | Project steps inventory resources | Yes | | |
| VIII.E.2.c       | Project steps develop a health improvement strategy | Yes | | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>IX.A.1</td>
<td>In the event of a multi-casualty incident or other local emergency, endeavors to perform in accordance with applicable County emergency plans and uses best efforts to maintain primary emergency services including suspension of non-emergency services as required</td>
<td>Yes</td>
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<tbody>
<tr>
<td>IX.B</td>
<td>Implements a plan for immediate recall of personnel during multi-casualty incidents or other emergency condition. Plan includes the capability of alerting off-duty personnel</td>
<td>Yes</td>
<td></td>
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</table>

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<tbody>
<tr>
<td>IX.C</td>
<td>Provides one vehicle as a disaster response vehicle, which is not an ambulance used in routine, day-to-day operations. Vehicle is kept</td>
<td>Yes</td>
<td></td>
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</tr>
</tbody>
</table>
in good working order and is available for emergency response to the scene. This vehicle may be used to carry personnel and equipment to a disaster site

### IX.C

Disaster response vehicle contains the following equipment, at a minimum: backboards and straps; cervical collars; head immobilization sets and foam wedges; splints for legs and arms; oxygen equipment; extra dressing and bandages; advanced life support equipment, especially IV therapy equipment; County approved disaster tags; and checklists for medical Incident Command personnel

<table>
<thead>
<tr>
<th>Incident Notification</th>
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<tbody>
<tr>
<td><strong>Contract Section</strong></td>
</tr>
<tr>
<td>IX.D</td>
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</table>

### Interagency Training for Exercises/Drills

<table>
<thead>
<tr>
<th><strong>Contract Section</strong></th>
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<th><strong>Comments</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>IX.E</td>
<td>Participates in EMS sanctioned exercises and disaster drills and other interagency training in preparation for this type of response</td>
<td>Yes</td>
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</tbody>
</table>

### Mutual Aid Requirements

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>IX.F</td>
<td>Responds in a mutual aid capacity within and outside of the County if so directed by Contract</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### VIII.2.1
Prepared to respond one Ambulance Strike Team staffed and equipped to the California Emergency Medical Services Agency Ambulance Strike Team Guidelines when directed by County in accordance with a disaster mutual aid request

**Yes**

<table>
<thead>
<tr>
<th>Ambulance Service Assistance</th>
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<tbody>
<tr>
<td>Contract Section</td>
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<tr>
<td>IX.G</td>
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### ADMINISTRATIVE PROVISIONS

<table>
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<tr>
<th>Audits/Inspections</th>
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<tr>
<td>Contract Section</td>
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<tr>
<td>X.A.1</td>
</tr>
<tr>
<td>X.A.2</td>
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<tr>
<td>X.A.3</td>
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<tr>
<td>X.A.4</td>
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**Observation of Operations**

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<tr>
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<tbody>
<tr>
<td>X.B</td>
<td>Allows Contract Manager or designee, at any time and without notification, to directly observe Contractor's control center operations, maintenance facilities, and ambulance post locations, and ride as &quot;third person&quot; to observe the operation of any of Contractor's ambulance units</td>
<td>Yes</td>
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</tbody>
</table>

**Contractor Revenue Recovery and Compensation from County**

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>X.D.1.a</td>
<td>Contractor does not charge for any patient for whom Contractor does not provide ambulance transport</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X.D.1.b</td>
<td>Contractor's patient charges for services provided pursuant to this Contract do not exceed the rates set forth in Exhibit G</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X.D.1.d</td>
<td>Contractor does not discount its published charges to benefit any non-governmental third party payer or other group</td>
<td>Yes</td>
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</table>

**Billing/Collection Services**

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<tr>
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<tbody>
<tr>
<td>X.E.1</td>
<td>Maintains a business office within Contra Costa County and a local or toll-free telephone number for all patient questions, complaints, or</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X.E.2</td>
<td>Operates a billing and accounts receivable system that is well-documented, easy to audit, and which minimizes the effort required of patients to recover from third party sources for which they may be eligible</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X.E.2a</td>
<td>Billing system automatically generates Medicare and Medicaid statements</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X.E.2b</td>
<td>Billing system itemizes all procedures and supplies employed on patient bills</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X.E.2c</td>
<td>Billing system is capable of responding to patient and third party payer inquiries regarding submission of insurance claims, dates and types of payments made, itemized charges, and other inquiries</td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>X.E.3</td>
<td>Makes no attempt to collect fees at the time of service</td>
<td>Yes</td>
<td></td>
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</tr>
<tr>
<td>X.E.4</td>
<td>Agrees to prepare and mail invoices for fire first responder services on behalf of any fire jurisdiction so requesting</td>
<td>Yes</td>
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</table>

### Cooperation With Evolving System

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<tr>
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</thead>
<tbody>
<tr>
<td>X.G</td>
<td>Agrees to participate and assist in the development of system changes subject to negotiated costs, if any</td>
<td>Yes</td>
<td></td>
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</tbody>
</table>

American Medical Response is in compliance with contract requirements, with the following exceptions:

Section II.A.5.a – *Integrated system to allow for quantitative reporting of overall clinical performance, which can be tied to providing integrated EMS system patient care solutions, training and community prevention, meaningful data comparison and greater collaborative research opportunities.* – *Fire agencies do not have systems in place currently that will allow extraction of data to be incorporated with AMR data. Fire agencies are currently reviewing several software packages that will allow this integration.*

Section III.M. - *Contractor shall staff and deploy a minimum of four thousand, twenty-four (4,024) paramedic ambulance unit hours per week throughout the term of this Contract. Compliance measured monthly.* – *AMR deployed a total of 4004 ALS unit hours for August.*

Section V.E.2 – *Equips all supervisory units and the operations center with satellite telephones to allow for uninterrupted ability to communicate with designated agencies in the event of a critical system failure or castastrophic event.* – *These satellite telephones are being obtained through grant funds pending approval.*