

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

913



**FROM:** Community Health Agency/ Department of Public Health

**SUBMITTAL DATE:**  
1/13/04

**SUBJECT:** Ratify the First Amendment to Contract EMS-2061 with the State of California Emergency Medical Services Authority – Statewide Evaluation of Emergency Medical Services for Children (EMS-C).

**RECOMMENDED MOTION:** That the Board of Supervisors:

- 1) Ratify the First Amendment to Contract with the State of California Emergency Medical Services for an extended performance period of October 1, 2003 through December 31, 2003;
- 2) Authorize the Chairperson to sign said Amendment on behalf of the County; and
- 3) Direct the Clerk of the Board to return all four originals to the Community Health Agency Contracts Administrator.

Departmental Concurrence

**BACKGROUND:** (Continued)

**Attachments**

OB:gp

*Susan D. Harrington*  
\_\_\_\_\_  
Susan Harrington, Director of Public Health

<b>FINANCIAL DATA</b>	Current F.Y. Total Cost:	\$ 0	In Current Year Budget:	N/A
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	N/A
	Annual Net County Cost:	\$ 0	For Fiscal Year:	03/04

<b>SOURCE OF FUNDS:</b> 100% State funded	<b>Positions To Be Deleted Per A-30</b>	<input type="checkbox"/>
	<b>Requires 4/5 Vote</b>	<input type="checkbox"/>

**C.E.O. RECOMMENDATION:**

**APPROVE**

**County Executive Office Signature**

*Dave Marting*

Dep't Recomm.:  Consent  Policy   
Per Exec. Ofc.:  Consent  Policy

Prev. Agn. Ref.:12/23/02, item 3.11 | District: All | Agenda Number:

**ATTACHMENTS FILED  
WITH THE CLERK OF THE BOARD**

**3.5**

FORM APPROVED COUNTY COUNSEL

JAN 14 2004  
M. S. K. / J. S. K.

500 7th St. 9th Fl. 92501  
COUNTY OF RIVERSIDE, CALIFORNIA

Form 11

Subject: Ratify the First Amendment to Contract EMS-2061 with the State of California Emergency Medical Services Authority – Statewide Evaluation of Emergency Medical Services for Children.

**BACKGROUND:** (Continued).

The EMS-C project currently assists Riverside County with the evaluation of emergency medical services for children in an effort to better serve this population. During the second year of funding the need for more information about the development, implementation, and sustainability of EMS-C components in EMS agencies in the State of California will be addressed. In order to ensure that all grant objectives are completed, the State of California has granted a three month, no cost extension past the September 30, 2003 original contract ending date.

**JUSTIFICATION FOR DELAY:** This Amendment was not received from the State of California until early October. This Form 11 and attachments were subsequently submitted to County Counsel and through the County approval process.

**Form 11 Attachment  
Contract/Lease/Purchase Summary Data**

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> <b>Contract</b> | <input type="checkbox"/> <b>Lease</b>     | <input type="checkbox"/> <b>Purchase</b>    |
| <input type="checkbox"/> Approval/Renewal           | <input type="checkbox"/> Approval/Renewal | <input type="checkbox"/> Sole Source        |
| <input type="checkbox"/> Sole Source                | <input type="checkbox"/> Multi-Year Lease | <input type="checkbox"/> Other Than Low Bid |
| <input type="checkbox"/> Personal Services          | <input type="checkbox"/> Equipment        | <input type="checkbox"/> Change Order       |
| <input type="checkbox"/> Independent Contractor     | <input type="checkbox"/> Real Property    |   |
| <input type="checkbox"/> Other than low Bid         | <input type="checkbox"/> Change Order     |   |
| <input type="checkbox"/> Change Order               |   |   |

<b>User Department:</b>	Community Health Agency
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<b>Vendor/Lessor Name:</b>	California Emergency Medical Services Authority
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<b>Vendor/Lessor Location:</b>	1930 9 <sup>th</sup> Street Sacramento, CA 95814-7043
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Selection Committee Member Names (RFP=s Only)
Minority

**Applicable Board Policy #**

**Comments:**

**RFQ/RFP Process:**

- Date Mailed:
- Response Date:
- # of Responses:
- # of Qualified Responses:

**Bidding Process:**

- |  |    |        |
|--|----|--------|
| Bid Range:   | \$ | To: \$ |
| Local Bid Range:                                     | \$ | To: \$ |
| Responsive and Responsible Bid Range:                | \$ | To: \$ |
| Local Performance Award Cost (5% maximum preference) | \$ | To: \$ |
| Local Preference FYTD: Cost                          | \$ | To: \$ |

**Contract/Lease Renewals Only  
Proposed Differences**

**Existing Agreement Items**

**Proposed Agreement Items**

1. Rates
2. Terms
3. Conditions
4. Legal Issues
5. Accountability