

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



**ITEM: 2.10
(ID # 21472)**

MEETING DATE:
Tuesday, March 28, 2023


FROM : EMERGENCY MANAGEMENT DEPARTMENT:

SUBJECT: EMERGENCY MANAGEMENT DEPARTMENT: Receive and file the American Medical Response Ambulance Service, Inc. (AMR) Annual Performance Report for Ground Advanced Life Support (ALS) Emergency Ambulance Services for Fiscal Year 2021/2022. [Districts: All]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Receive and file the AMR Annual Performance Report for Ground Advanced Life Support (ALS) Emergency Ambulance Services for Fiscal Year 2021/2022.

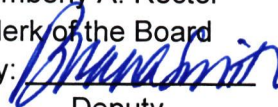
ACTION:


Bruce Barton, EMD Director 3/20/2023

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Gutierrez, seconded by Supervisor Washington and duly carried by unanimous vote, IT WAS ORDERED that the above matter is received and filed as recommended.

Ayes: Jeffries, Spiegel, Washington, Perez, and Gutierrez
Nays: None
Absent: None
Date: March 28, 2023
xc: E.M.D.

Kimberly A. Rector
Clerk of the Board
By: 
Deputy

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

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$ N/A	\$ N/A	\$ N/A	\$ N/A
NET COUNTY COST	\$ N/A	\$ N/A	\$ N/A	\$ N/A
SOURCE OF FUNDS: N/A			Budget Adjustment: No	
			For Fiscal Year: N/A	

C.E.O. RECOMMENDATION: Approve

BACKGROUND:

Summary

On January 13, 2015, Item 3.8, the Board of Supervisors approved the Agreement with American Medical Response (AMR) for Advanced Life Support (ALS) emergency ambulance services for the period of July 1, 2015, through June 30, 2020, with the option of ten (10) earned annual extensions. AMR is responsible for submitting a written request for earned extensions to the Contract Administrator no later than September 1st each year following the first full contract year. This written request must include sufficient evidence of compliance with the Agreement requirements and stated in the annual performance report that is submitted to the Riverside County Emergency Medical Services Agency (REMSA). The agreement term utilizes earned annual extensions to incentivize continuous investment in Emergency Medical Services (EMS) system enhancements throughout the life of the agreement.

AMR submitted their first annual report and written request for a one year earned extension on September 1, 2016, amending the contract term through June 30, 2021. On September 1, 2017, the second annual report and written request for a one year earned extension was submitted by AMR extending the contract term through June 30, 2022. Subsequently, Amendments No. 3 and No. 4, were submitted on September 1, 2018, and September 1, 2019, respectively, and extended the contract through June 30, 2024.

On September 1, 2020, AMR submitted a written request for a one-year earned extension to amend the contract through June 30, 2025. On September 1, 2021, AMR submitted a written request for a one year earned extension to amend the contract through June 30, 2026. Monitoring of the contractor's performance as required under the agreement continued uninterrupted throughout the COVID Pandemic and Amendment No. 5 extending the Agreement for an additional two-year earned extensions through June 30, 2026, was approved on August 30, 2022.

REMSA has concluded the annual performance report submitted by American Medical Response (AMR) for the period of July 1, 2021 through June 30, 2022. The following sections included contract compliance deficiencies in several areas which impact the possibility for AMR to qualify for the earned annual renewal for the performance year. The specified areas that were out of compliance with contract requirements are submission of monthly compliance

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STATE OF CALIFORNIA**

reports within 15 days of the end of each month, response time compliance below both enhanced and minimum required criteria and sending BLS ambulances to ALS calls outside what has been approved by REMSA through an approved Emergency Medical Dispatch (EMD) program. Additionally, the annual report was submitted by the required date but did not include final response time compliance reports for the months of February 22 through June 22. Along with the annual performance report AMR submitted a written request for a one-year earned extension to amend the contract through June 30, 2027. After careful review of all submitted documentation, the request for a one year earned annual renewal was denied on March 14, 2023 and the current Ambulance 9-1-1 Advance Life Support (ALS) emergency ambulance service contract extension remains through June 30, 2026.

Impact on Residents and Businesses

The residents of Riverside County require the services supplied by an efficient EMS system. The ALS emergency ambulance agreement provides services to the County EMS plan designed to optimize emergency medical care to residents thereby minimizing morbidity and mortality from acute illnesses and traumatic injuries.

ATTACHMENTS:

- 2021-2022 AMR Annual Report
- 2021-2022 AMR Compliance Review Matrix
- 2021-2022 AMR Annual Response Time Report
- 2021-2022 AMR Extension Request Denial Letter


Rebecca S Cortez, Principal Management Analyst

3/21/2023


Min C Tran, County Counsel

3/21/2023



Ambulance Response Compliance Review

AMR Compliance Summary
7/1/2021 – 06/30/2022

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RIVERSIDE COUNTY AMBULANCE RESPONSE TIME COMPLIANCE

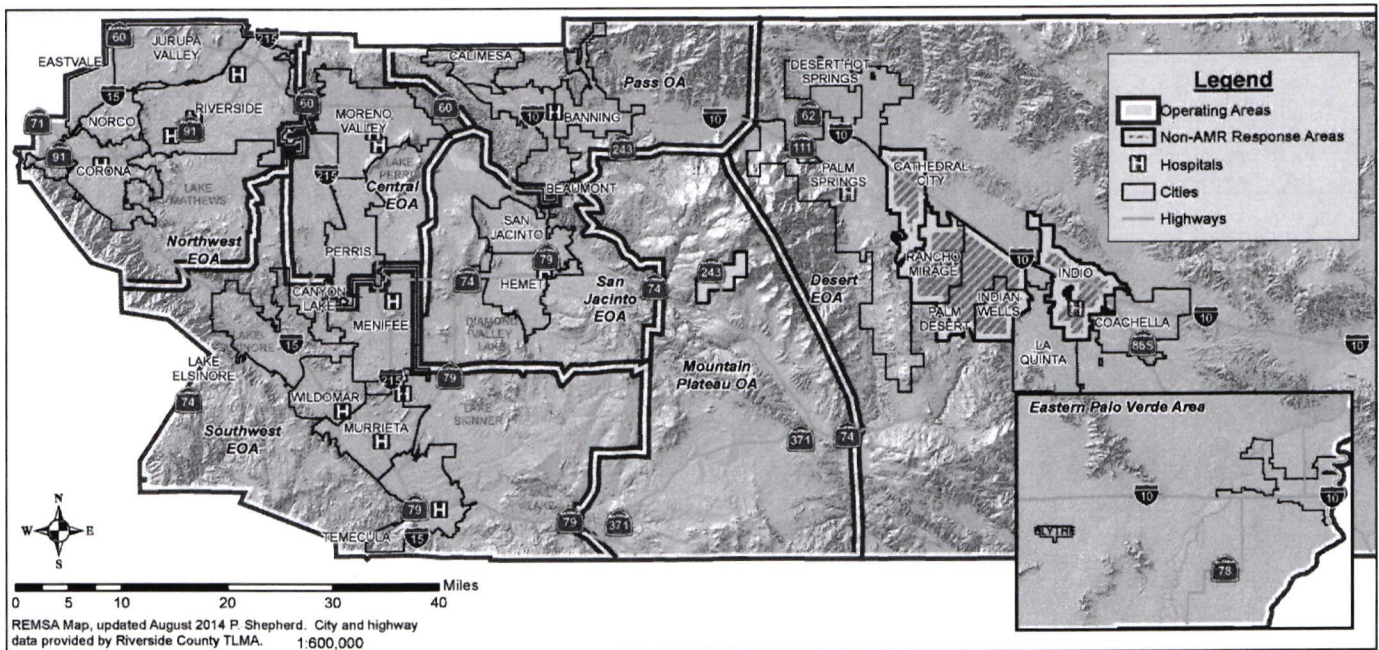
Overview

The Riverside County EMS System covers all 9-1-1 medical responses in Riverside County. American Medical Response (AMR) is the contracted ambulance provider for most of Riverside County, and this report outlines the AMR response time compliance in Riverside County through the end of December 2018. Data provided refers to the AMR-serviced Ambulance Operating Areas delineated in the master service agreement dated July 1, 2015.

Below is a map of the Ambulance Operating Areas, which are discussed in the corresponding Administrative Group meetings based on region. A complete map of the County with Response Time Zones labeled is available at <http://www.remsa.us/zones>



RIVERSIDE COUNTY EMERGENCY MEDICAL SERVICES SYSTEM AMBULANCE OPERATING AREAS



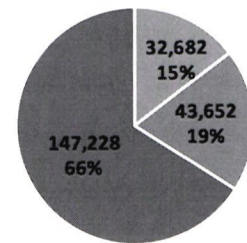
The West County Response Time Zones are responsible for approximately 66% of 9-1-1 calls made to AMR from the EMS System. East County and Mid County response zones make up about 14% and 20% of 9-1-1 call volume, respectively.

West County includes the Northwest, Southwest, and Central response zones. The City of Riverside is a subzone of the Northwest Zone, which accounts for more responses than all other subzones across the County.

Mid County region includes the Pass, San Jacinto, and Mountain Plateau Response Time Zones.

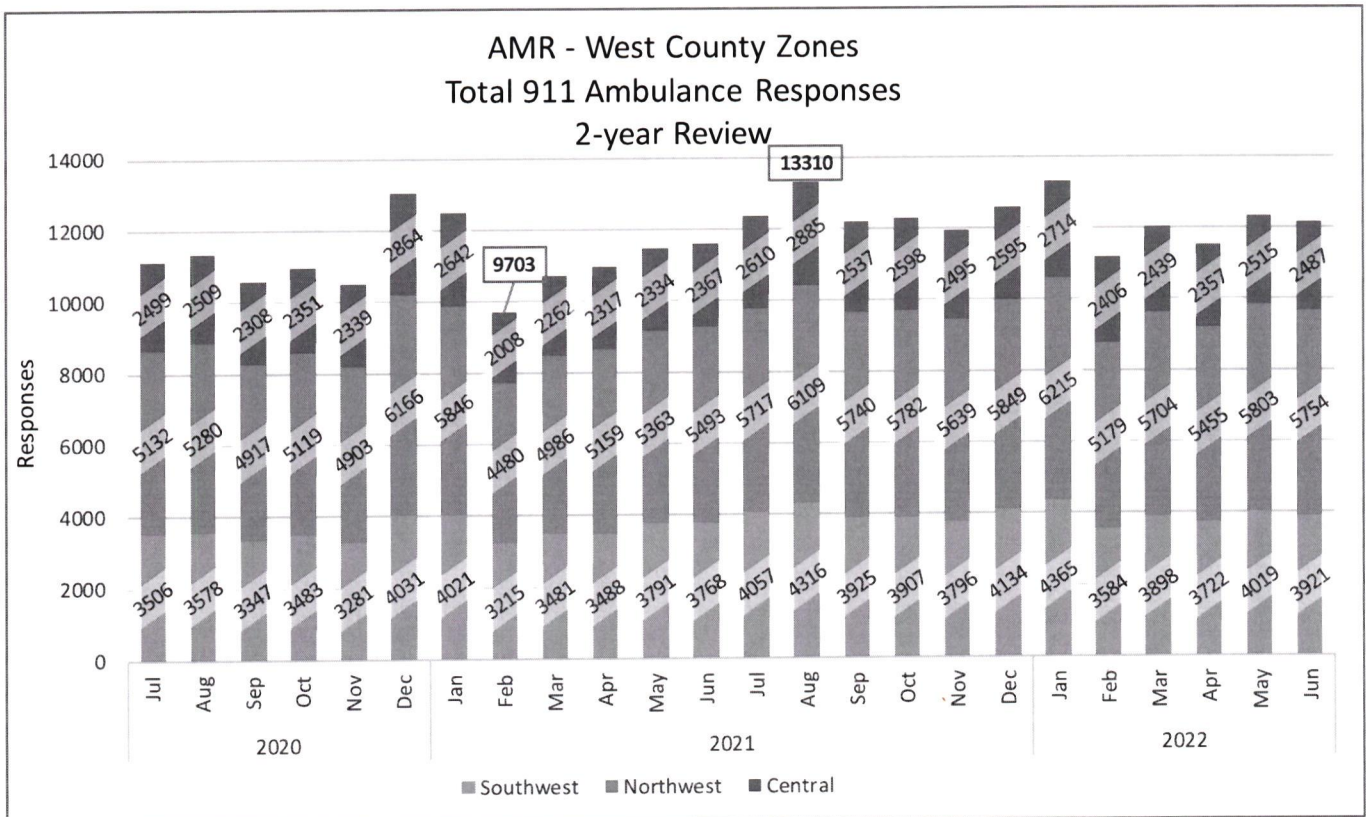
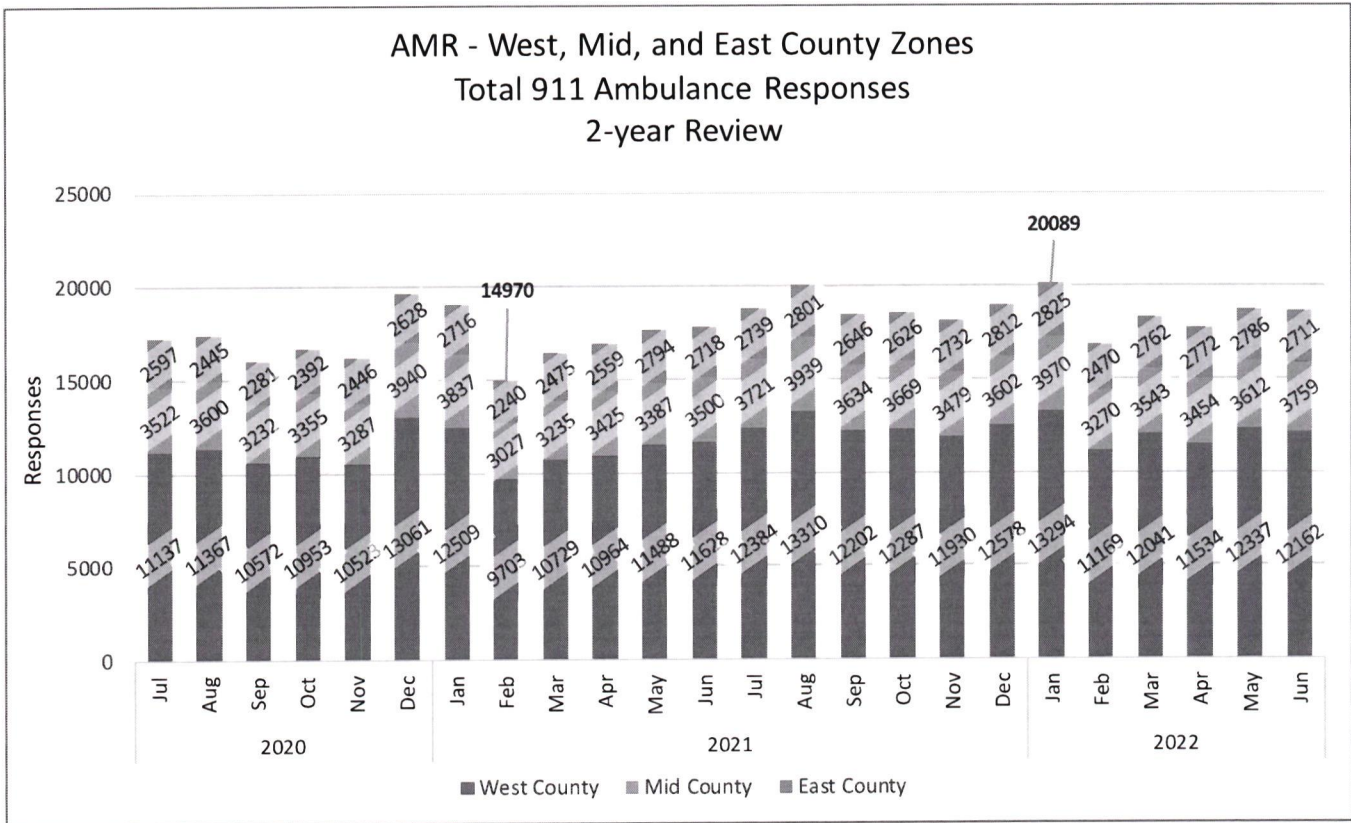
East County includes the Desert and Palo Verde Response Time Zones.

AMR - Response Time Zones
Regional 9-1-1 Ambulance Responses
Jul 2021 through Jun 2022

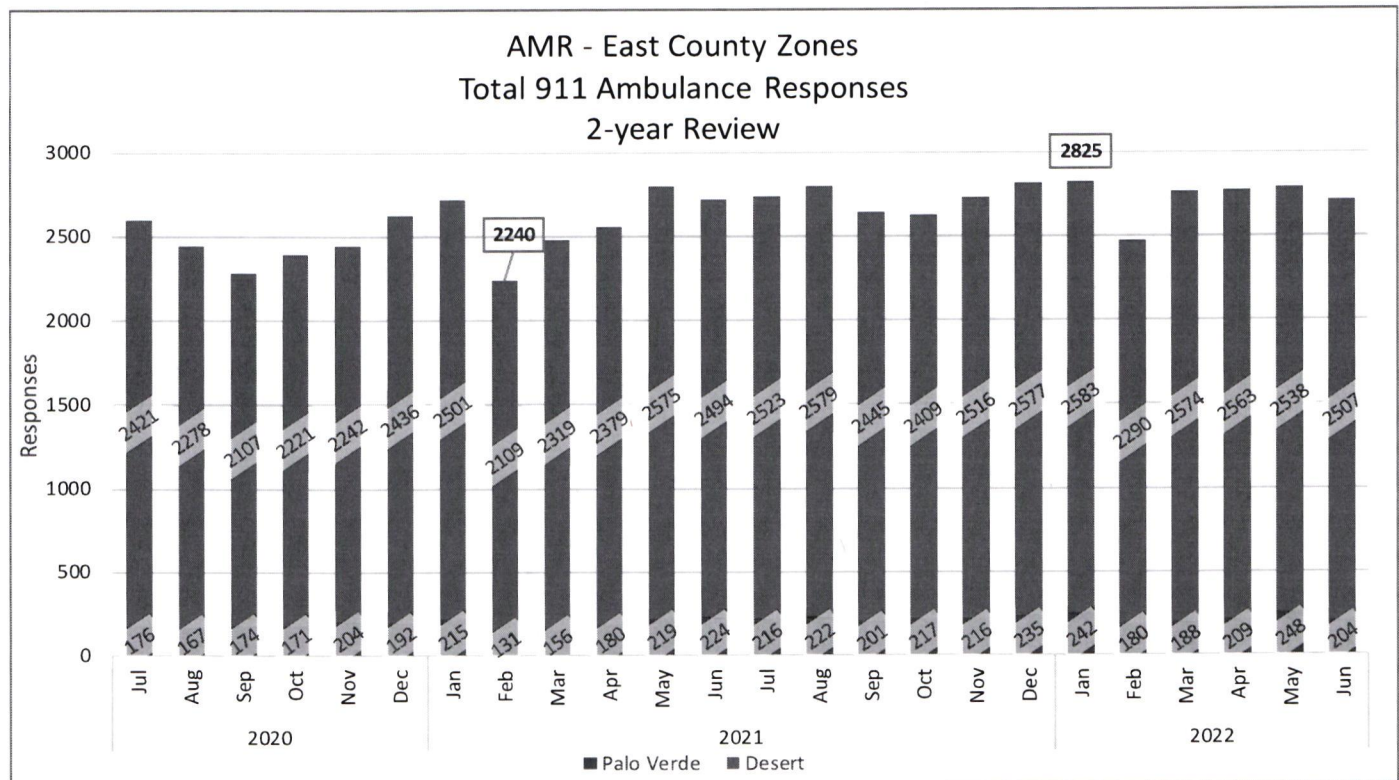
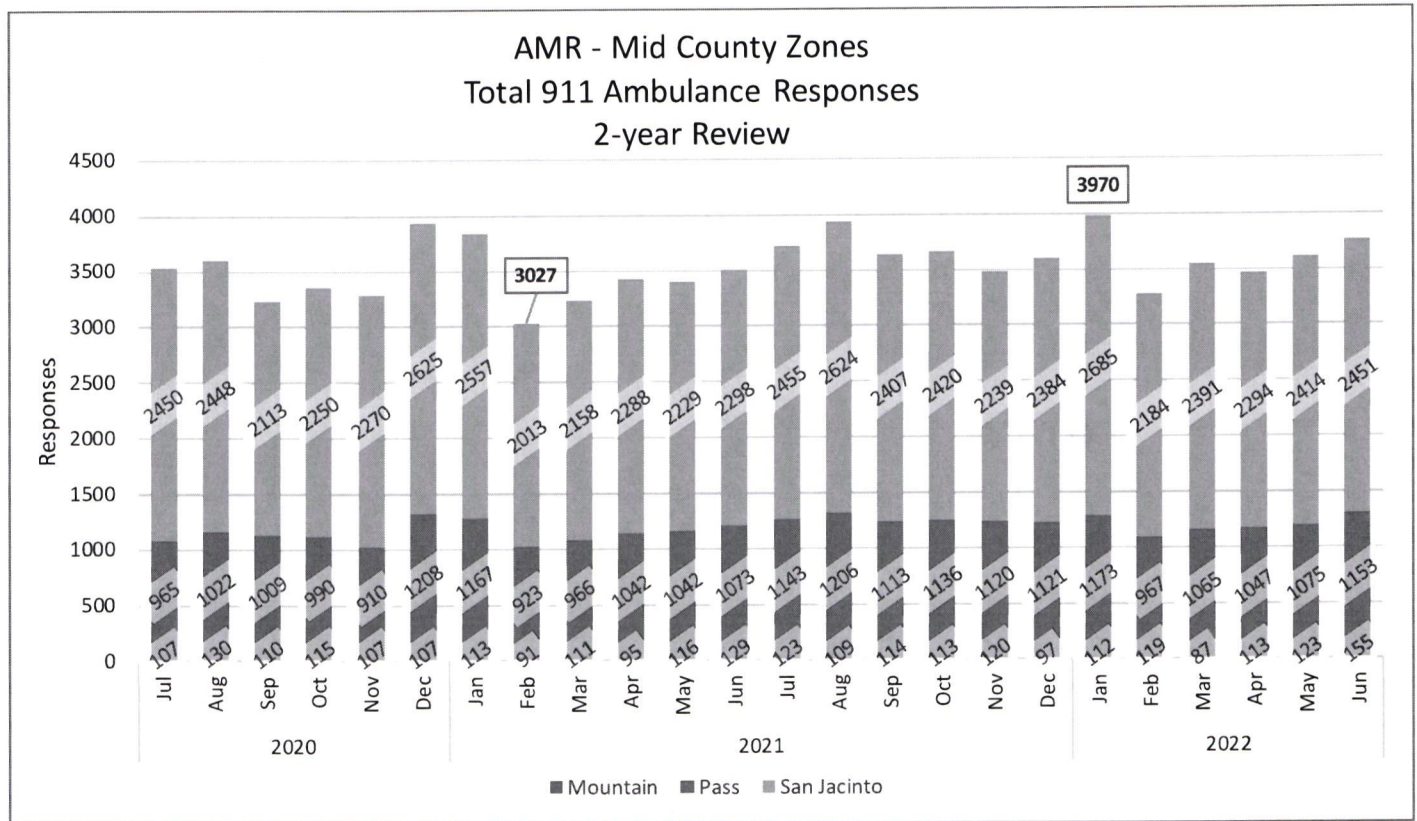


■ East County ■ Mid County ■ West County

West, Mid, and East County Areas Comparisons



West, Mid, and East County Areas Comparisons (Cont'd)



CENTRAL ZONE

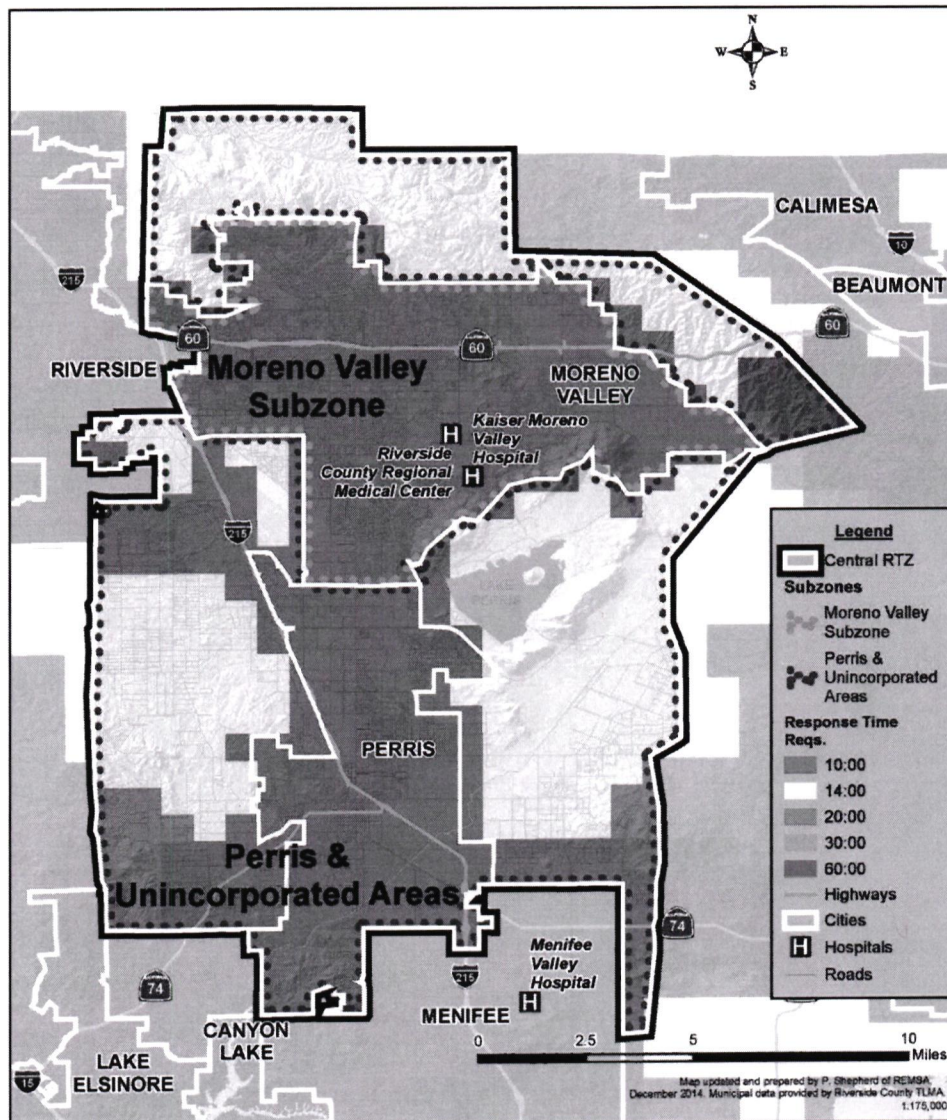
The Central Response Time Zone (RTZ) encompasses Moreno Valley, Perris, and unincorporated areas surrounding these cities. It borders the Northwest and Southwest Response Time Zones to the West, the Southwest RTZ to the South, and the Pass and San Jacinto RTZs to the East. It is divided into two subzones: the Moreno Valley Response Time Subzone (RTSZ) and the Perris and Unincorporated Areas RTSZ. During the period in review for this report, the Moreno Valley Subzone received higher 911 ambulance response volume than did the Perris and unincorporated area, as illustrated in the following charts. These charts cover overall 911 ambulance responses, response time compliance, compliance/responses by subzone, responses more than ten minutes late, and exemptions.

The maps referenced in this report are available at remsa.us/zones

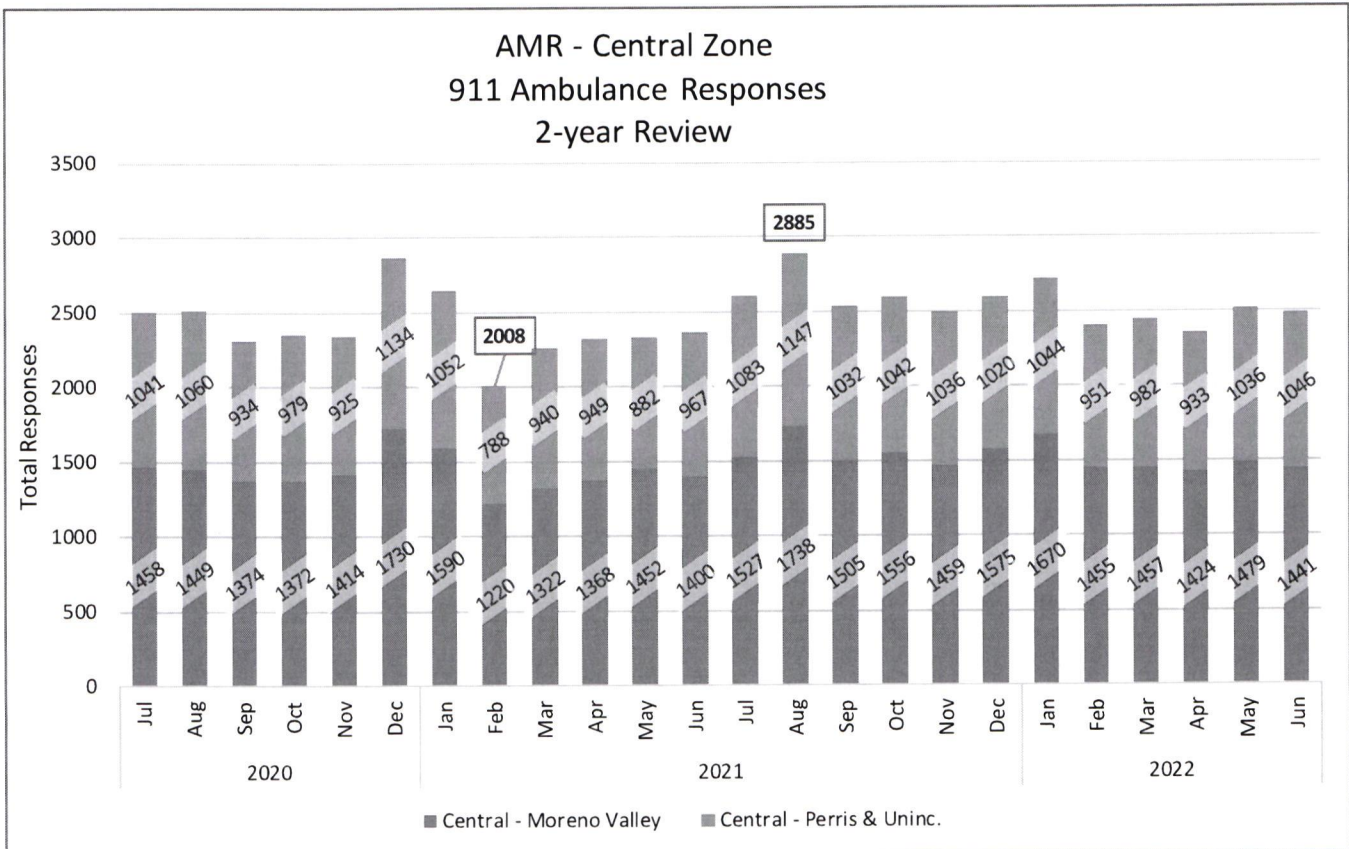
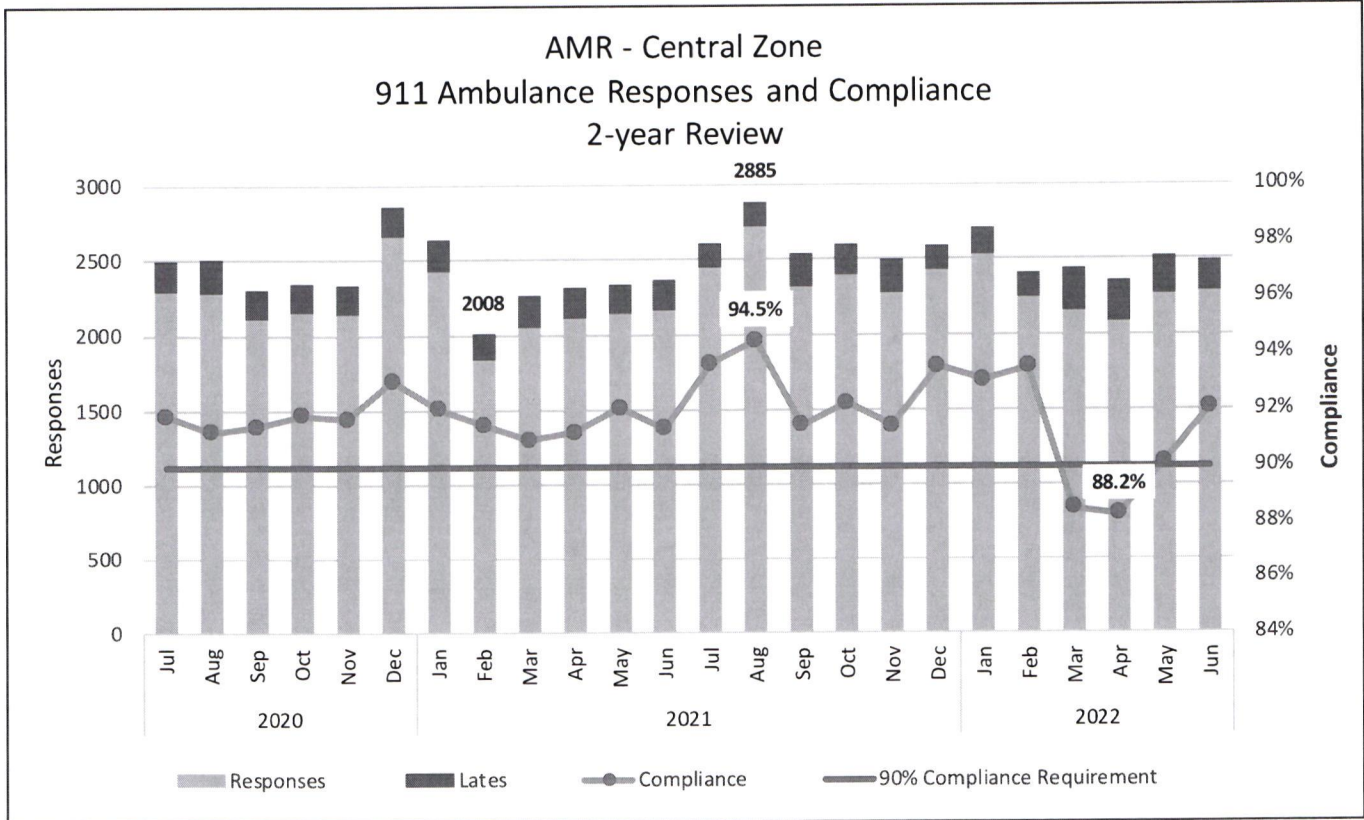


RIVERSIDE COUNTY EMERGENCY MEDICAL SERVICES SYSTEM
GROUND ALS EMERGENCY AMBULANCE RESPONSE TIME ZONES

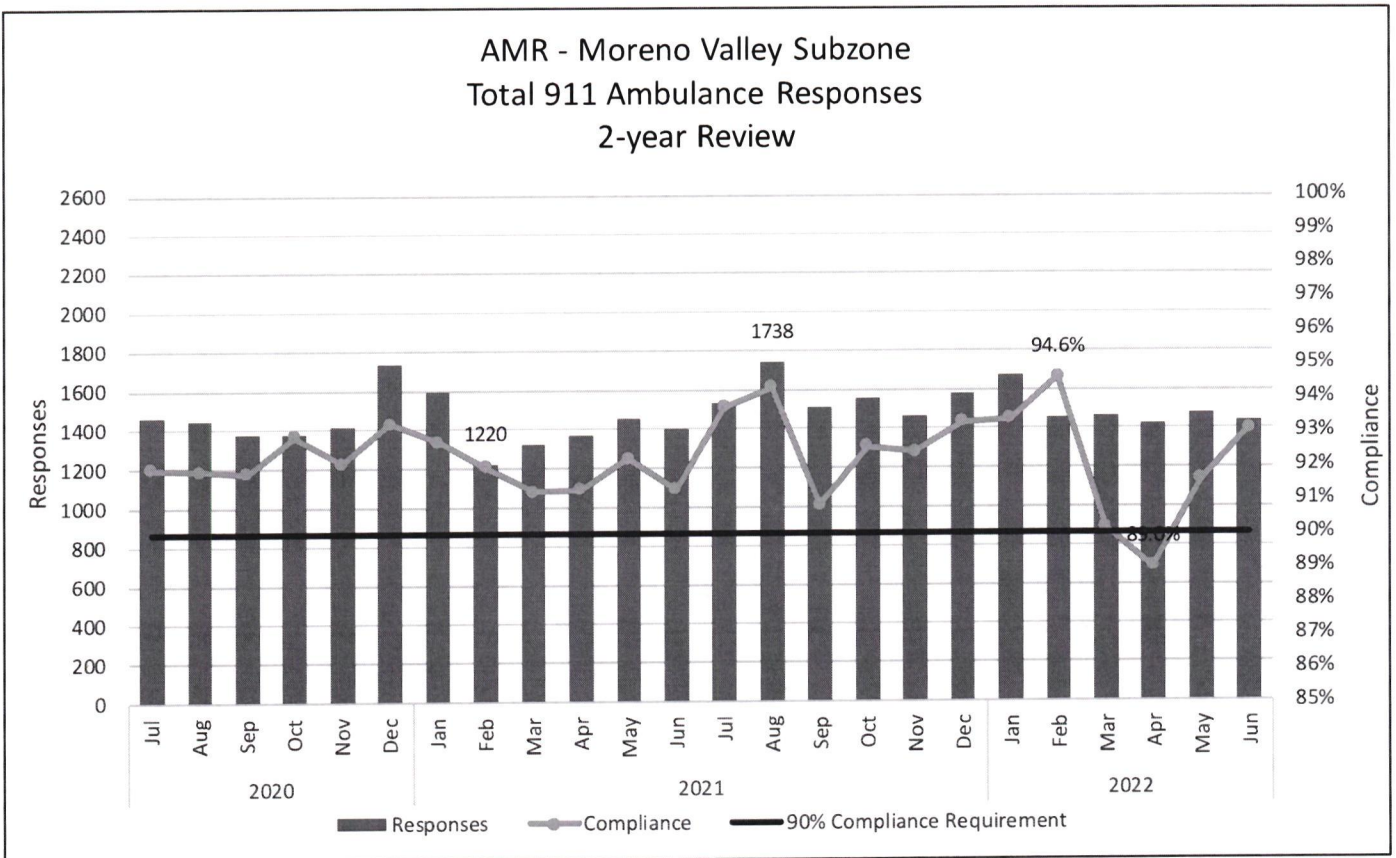
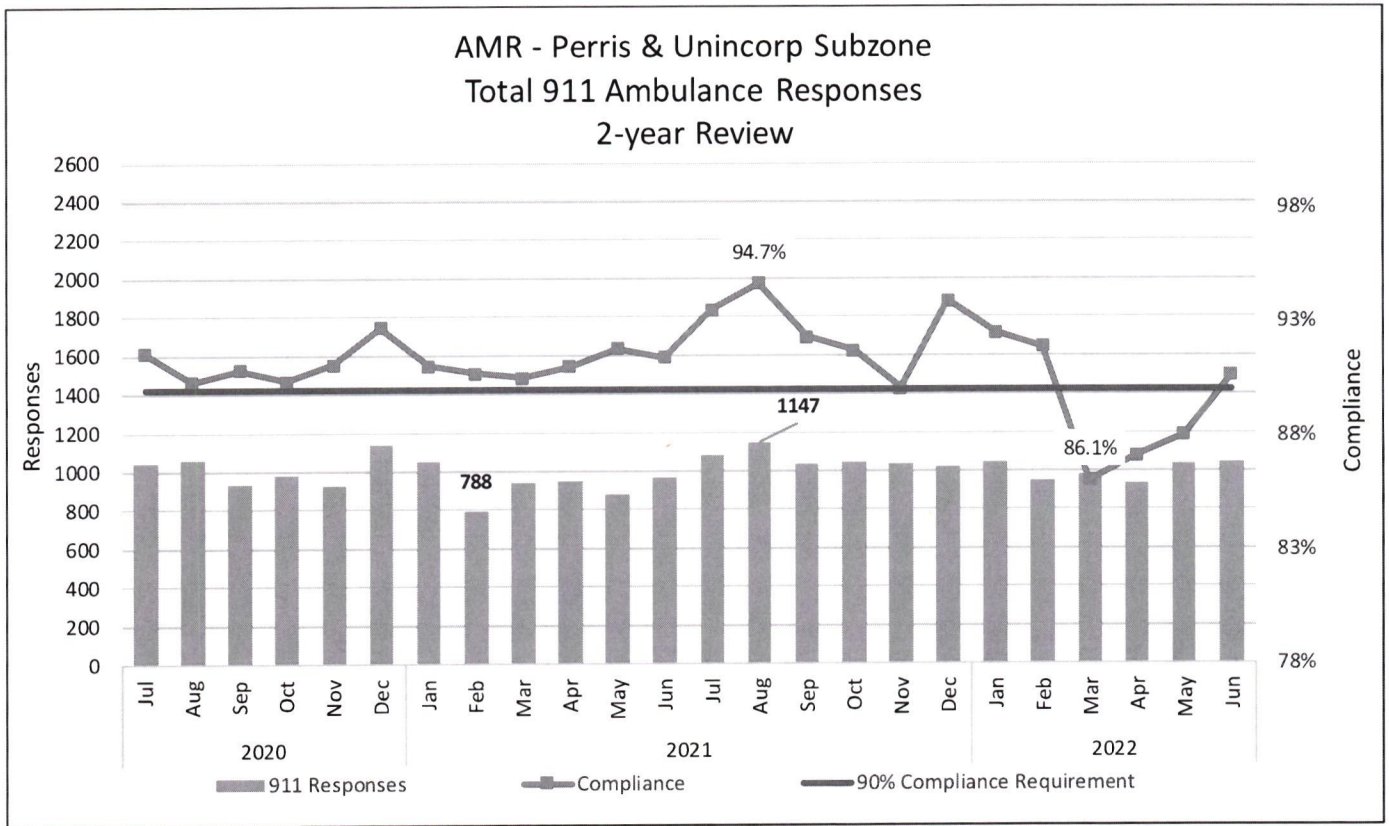
CENTRAL



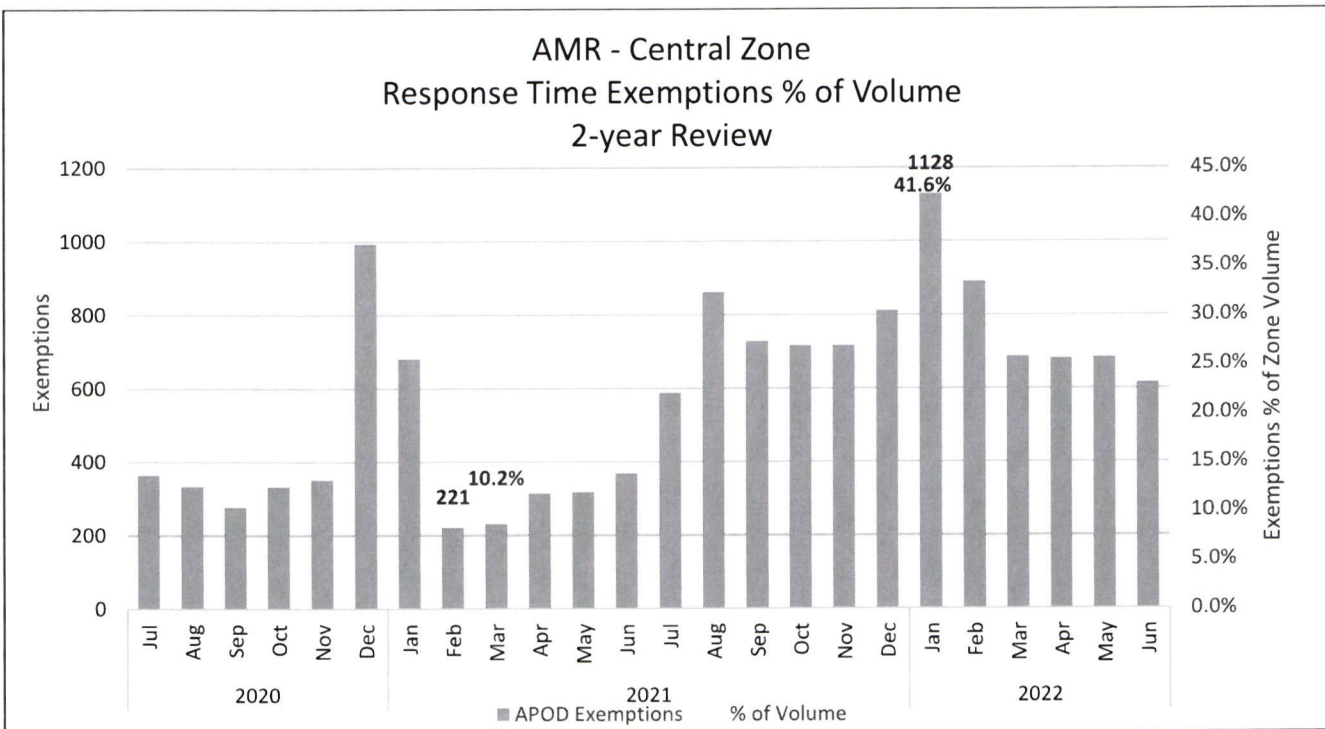
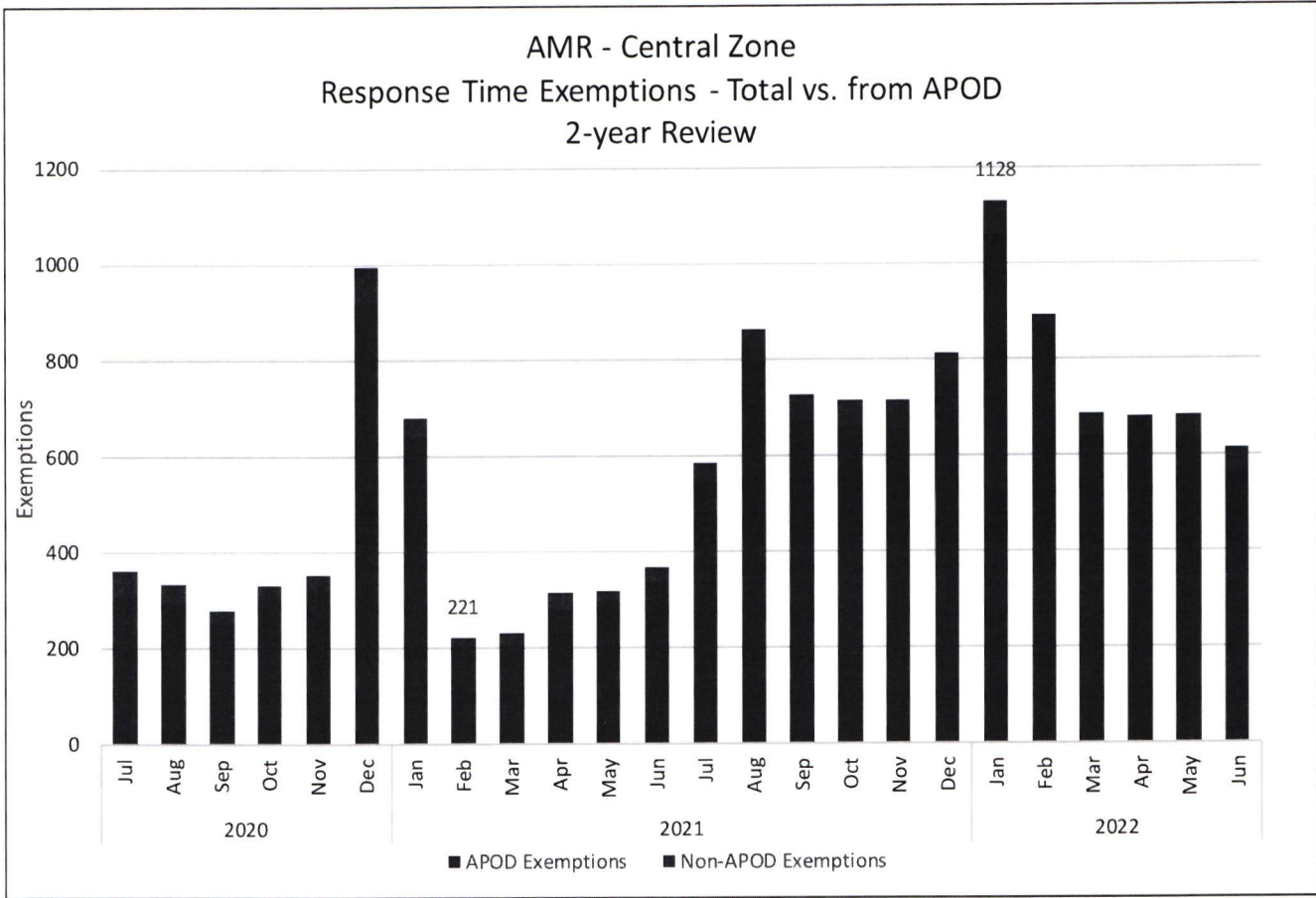
Central Zone: Response and Compliance Data



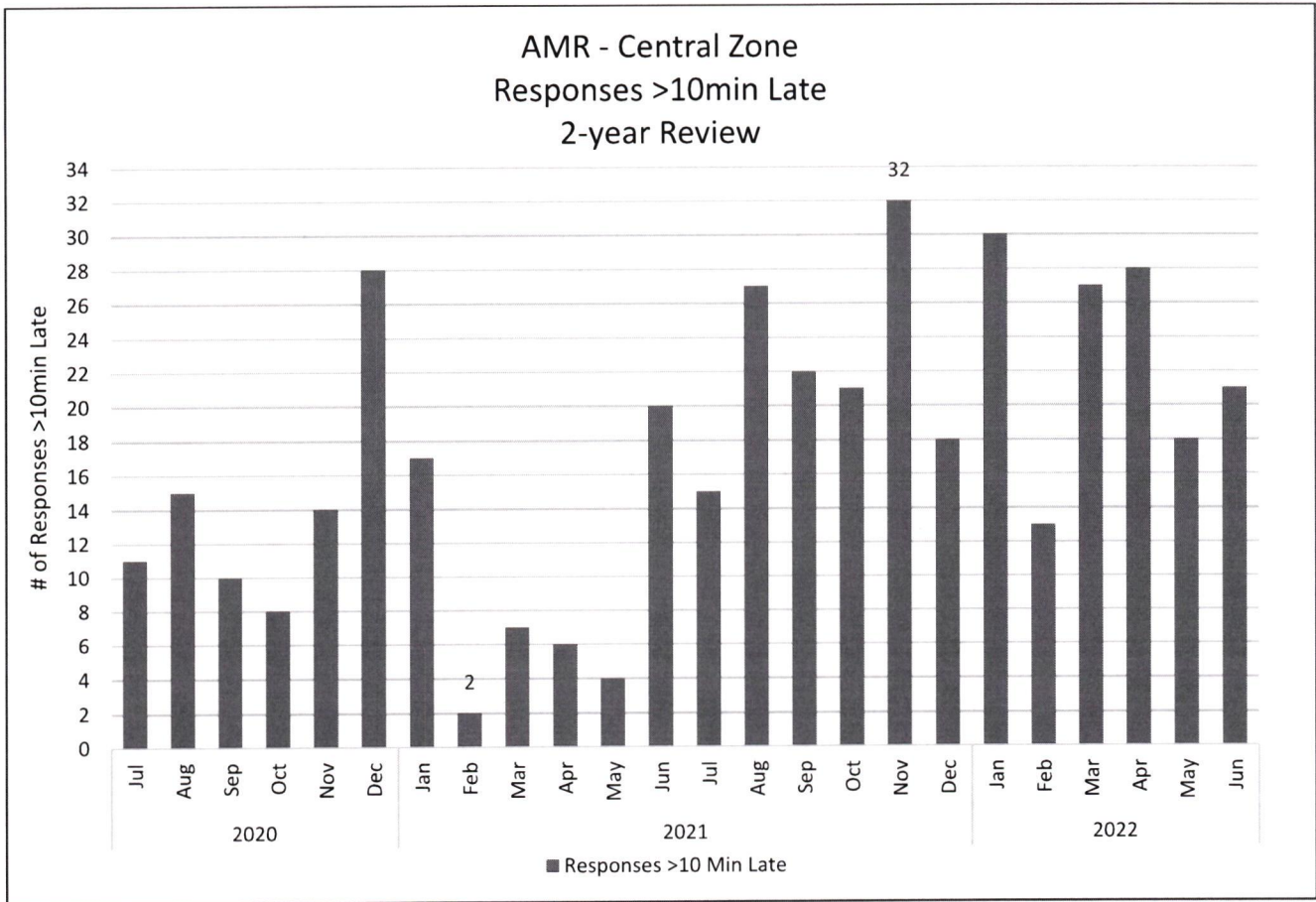
Central Zone: Subzone Response and Compliance Data



Central Zone: Exemptions



Central Zone: Responses > 10 Minutes Late

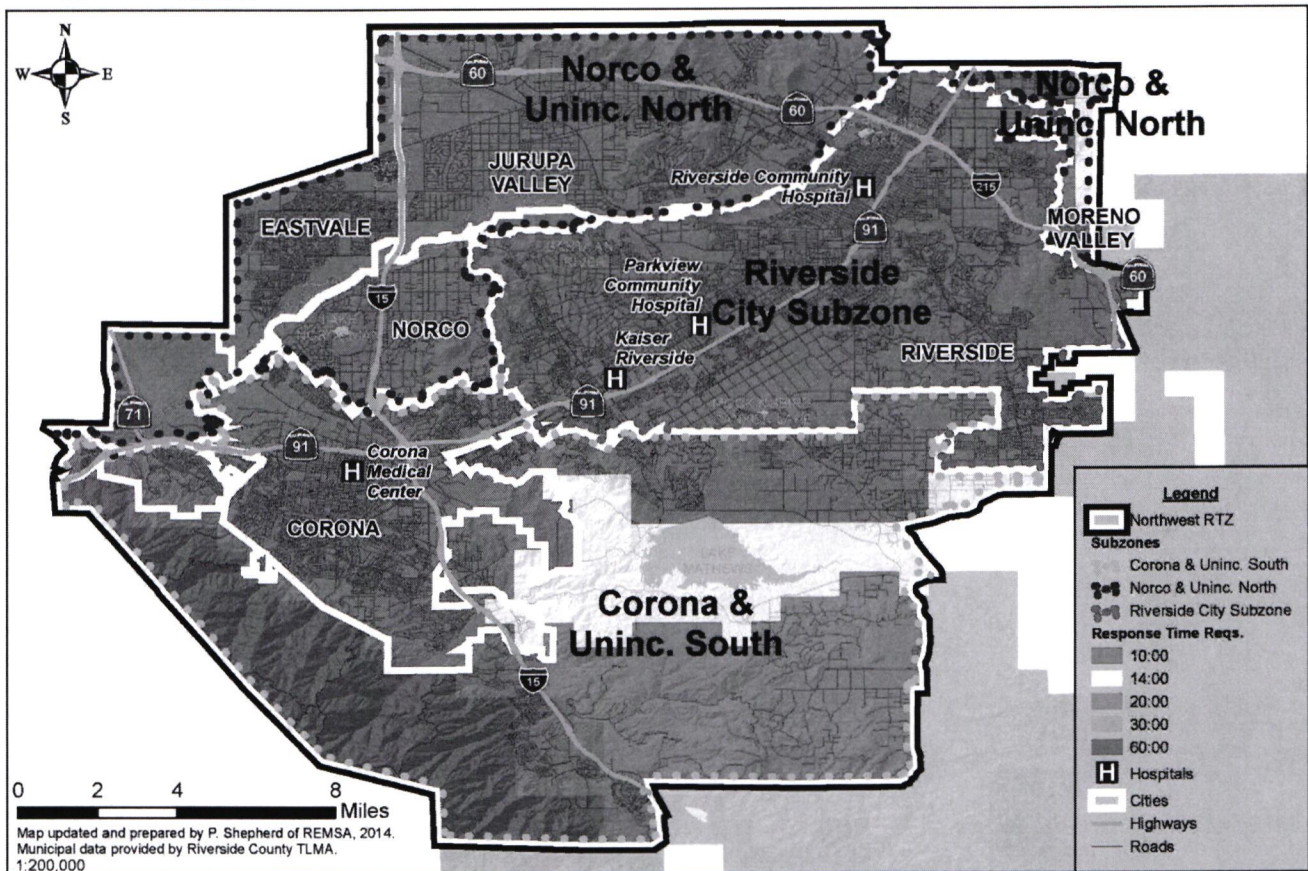


NORTHWEST ZONE

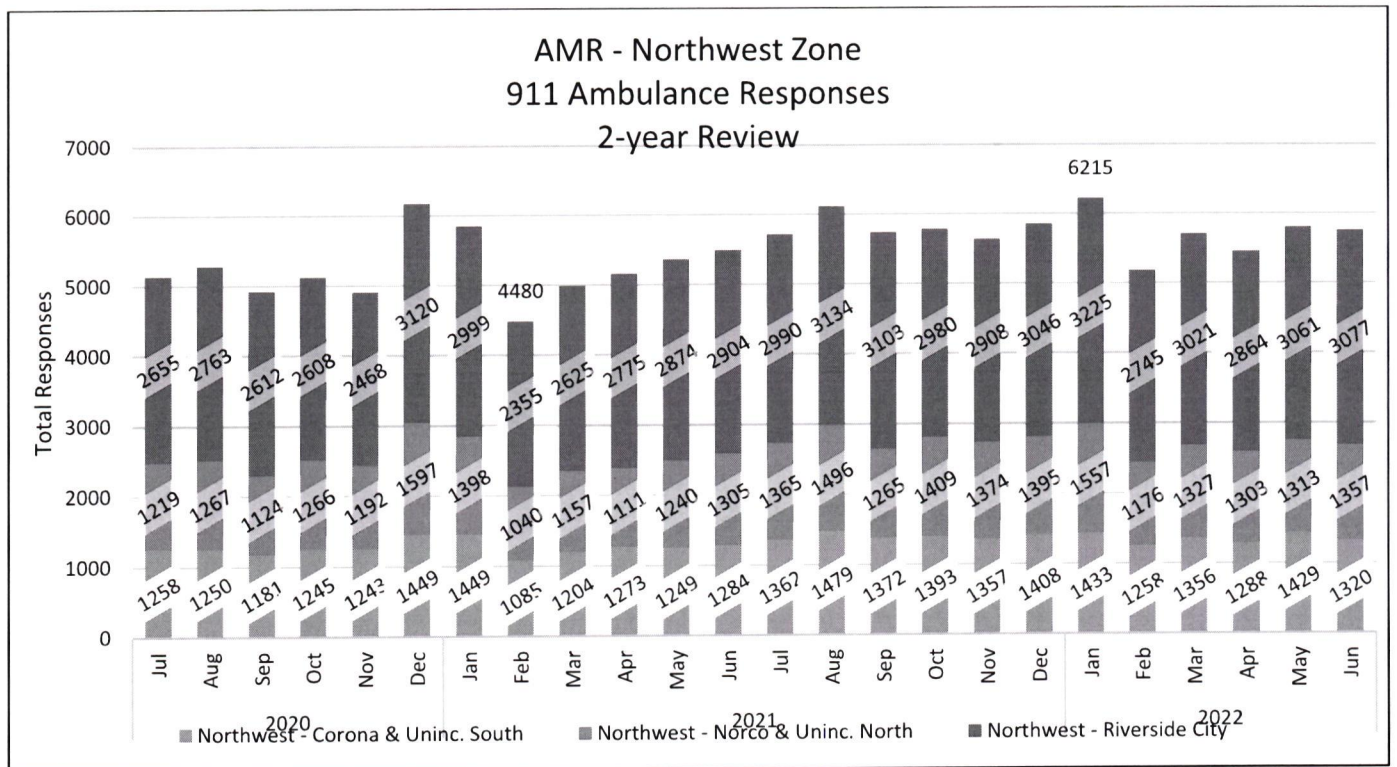
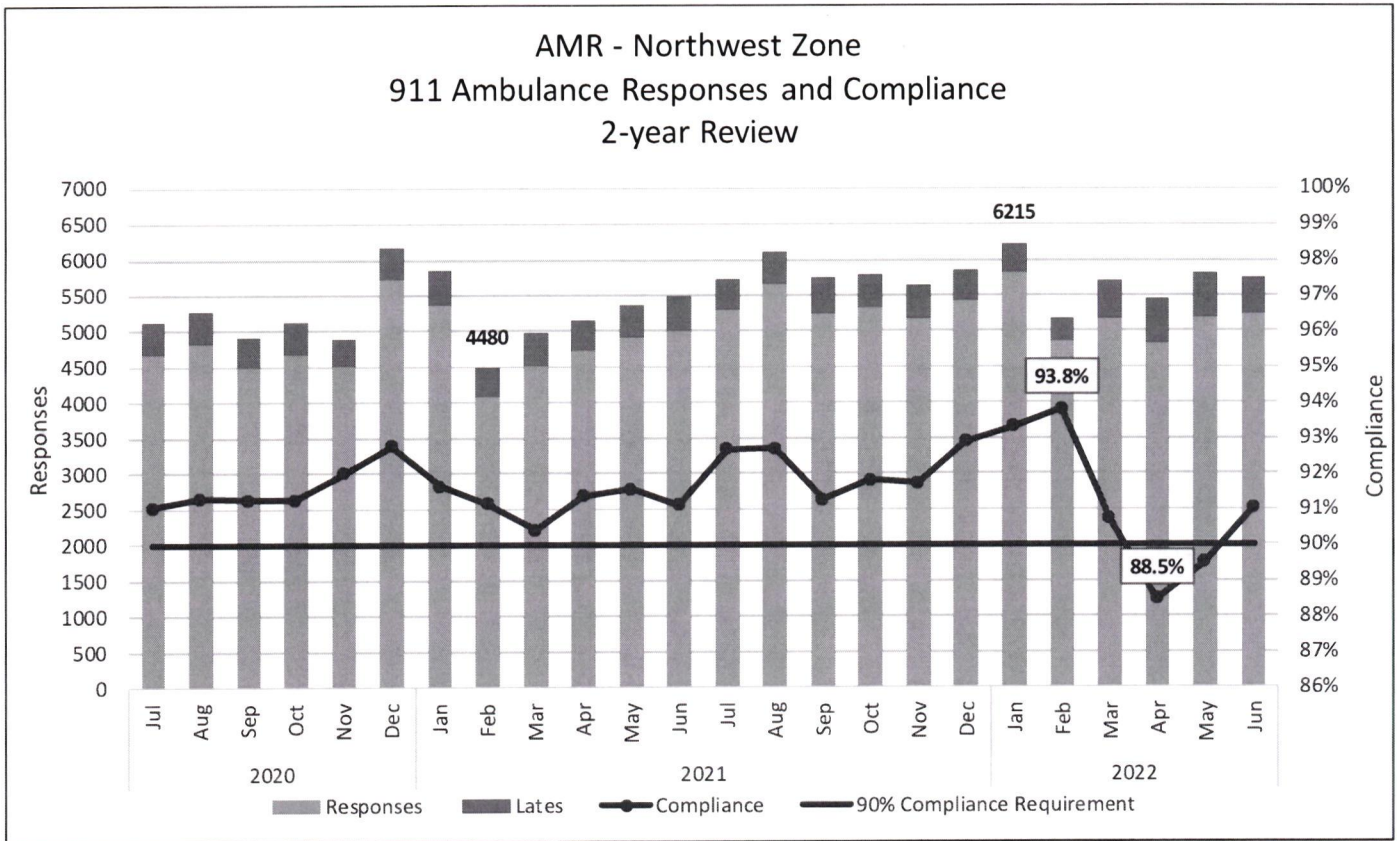
The Northwest Response Time Zone includes: Riverside, Corona, Norco, Eastvale, Jurupa Valley, and unincorporated areas of the County adjacent to these, as depicted in the Northwest Response Time Zone (RTZ) map. It borders the Southwest Zone to the South and the Central Zone to the East. The Northwest Zone is divided into three subzones: the Riverside City Subzone, the Corona & Unincorporated South Area Subzone, and the Norco & Unincorporated North Area Subzone. During the period in review for this report, the Riverside City Subzone received the highest volume of 911 ambulance responses, as is depicted in the following charts. Included for review are: Northwest Zone compliance, 911 ambulance responses, exemptions, and responses more than ten minutes late.



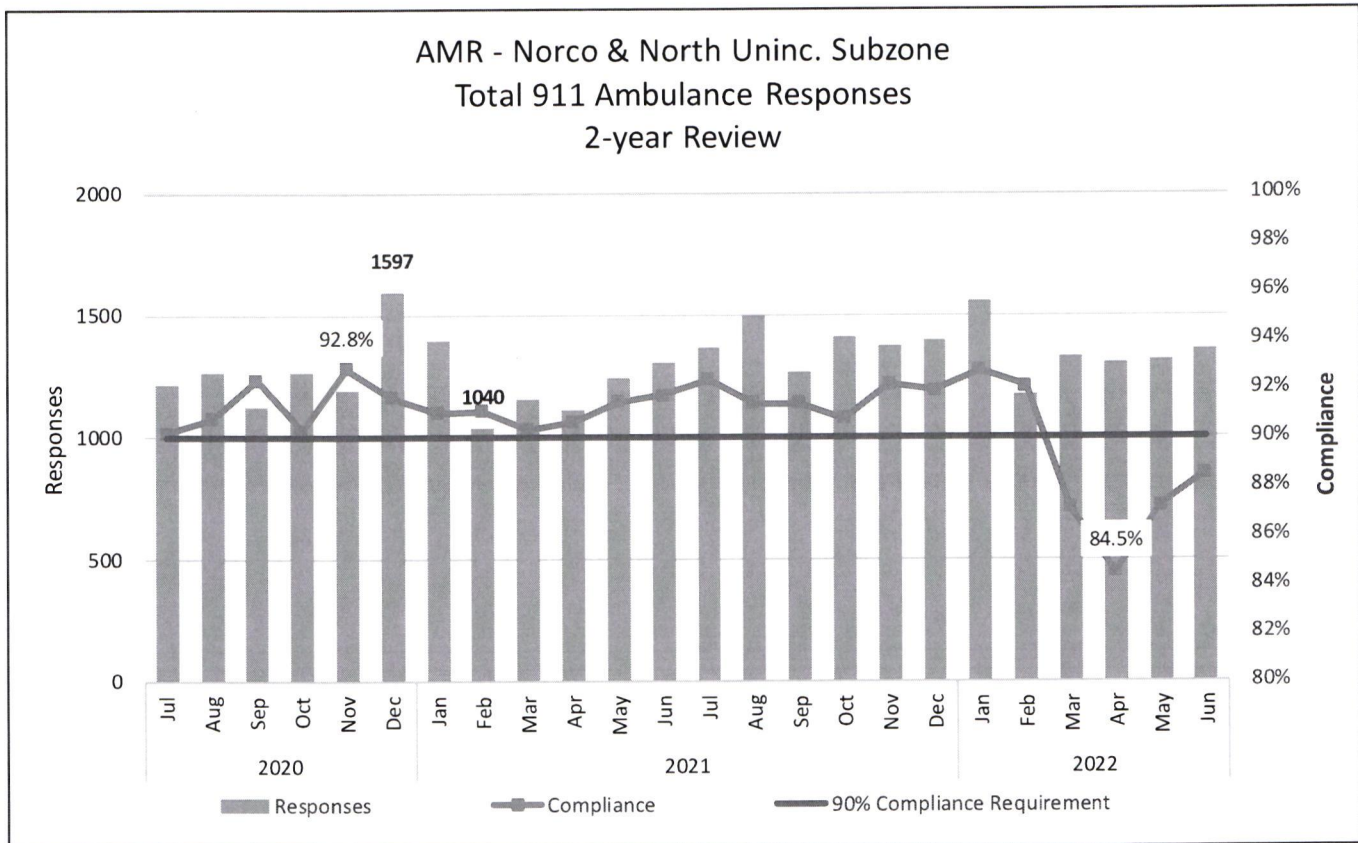
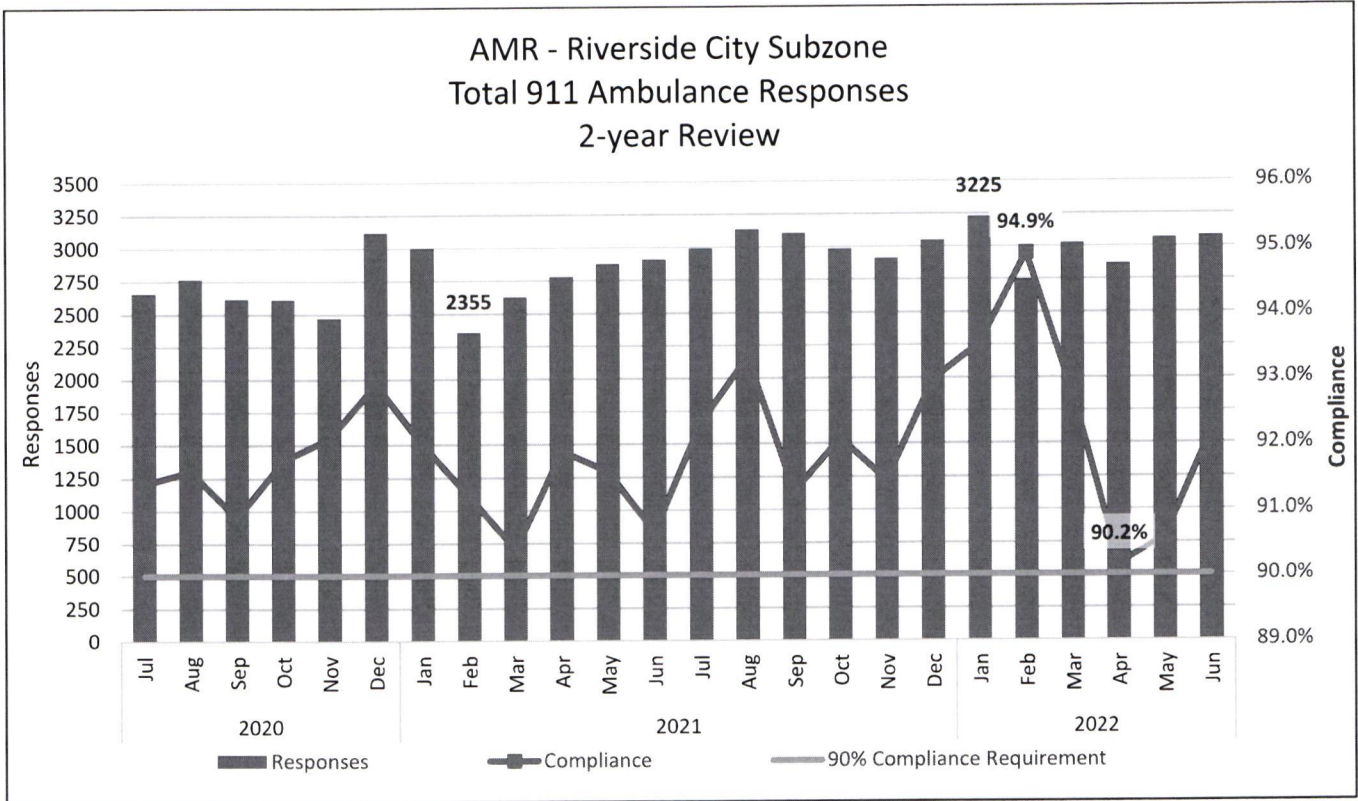
RIVERSIDE COUNTY EMERGENCY MEDICAL SERVICES SYSTEM GROUND ALS EMERGENCY AMBULANCE RESPONSE TIME ZONES NORTHWEST



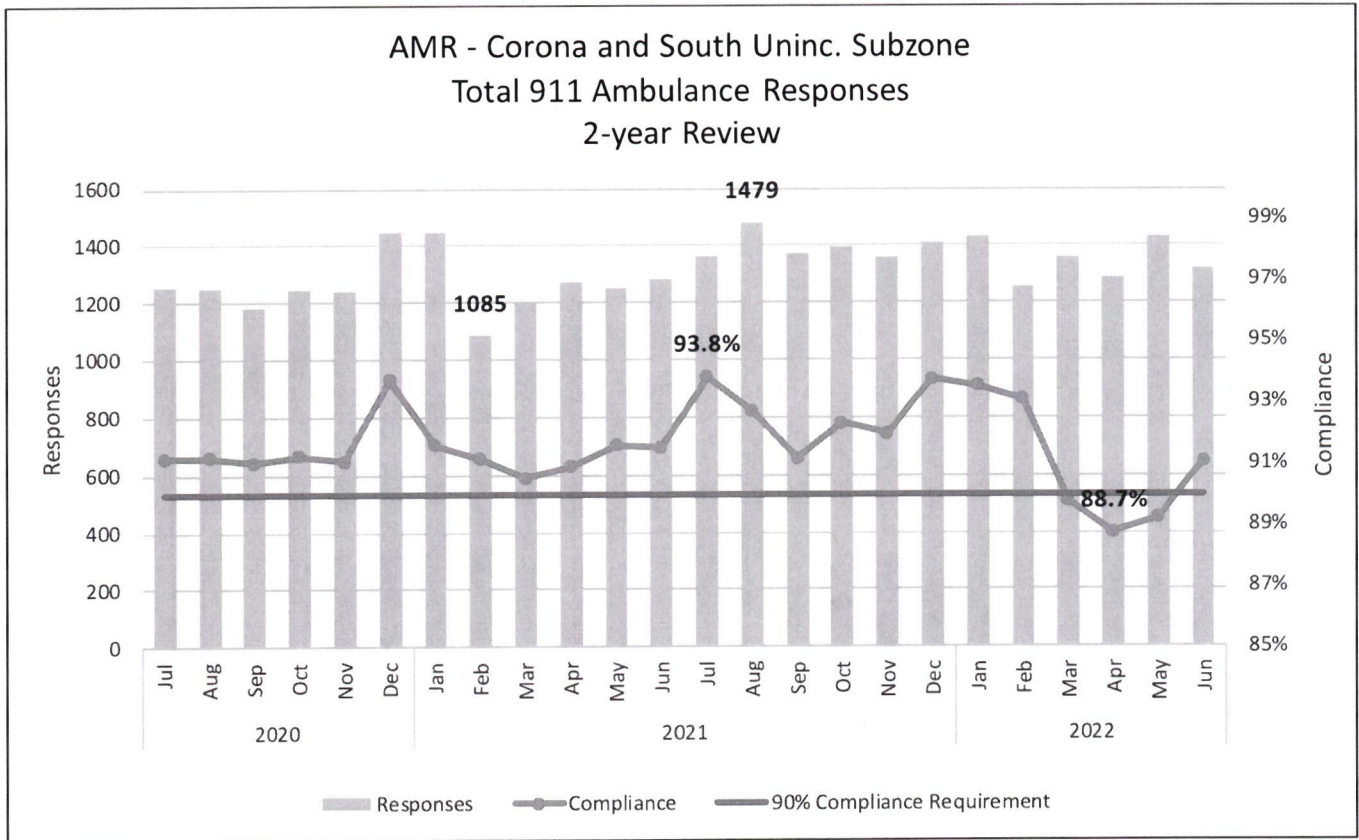
Northwest Zone: Response and Compliance Data



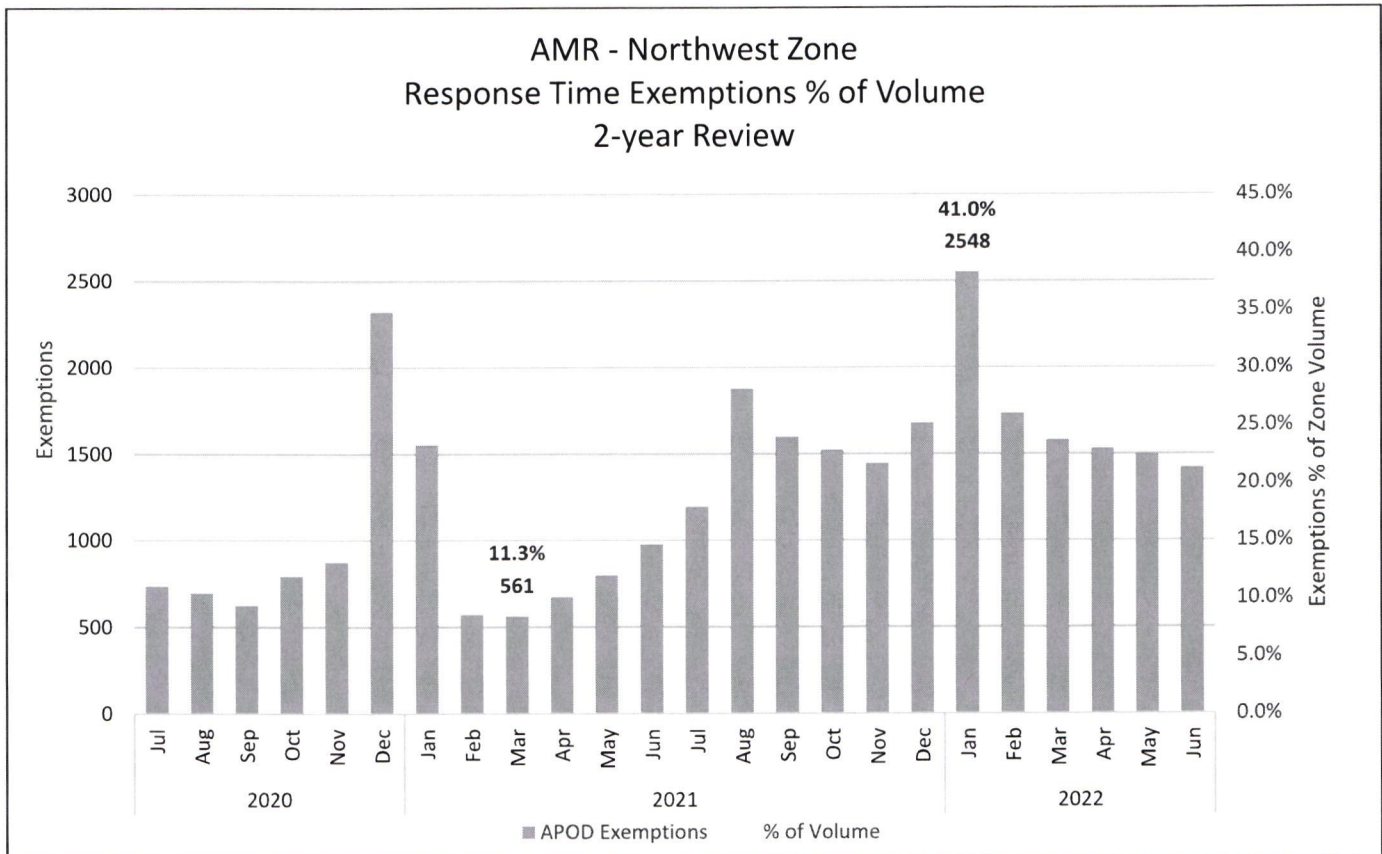
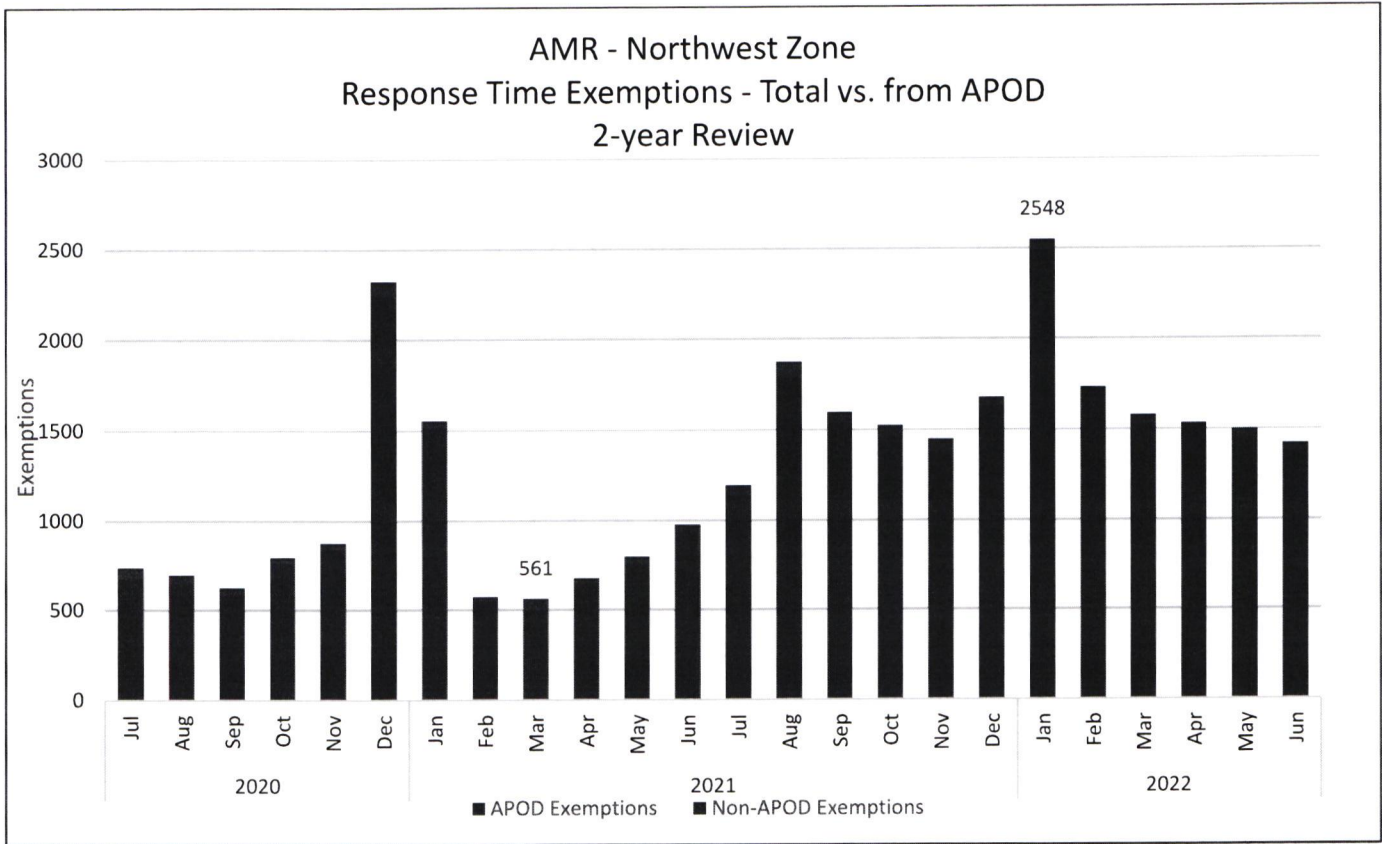
Northwest Zone: Subzone Response and Compliance Data



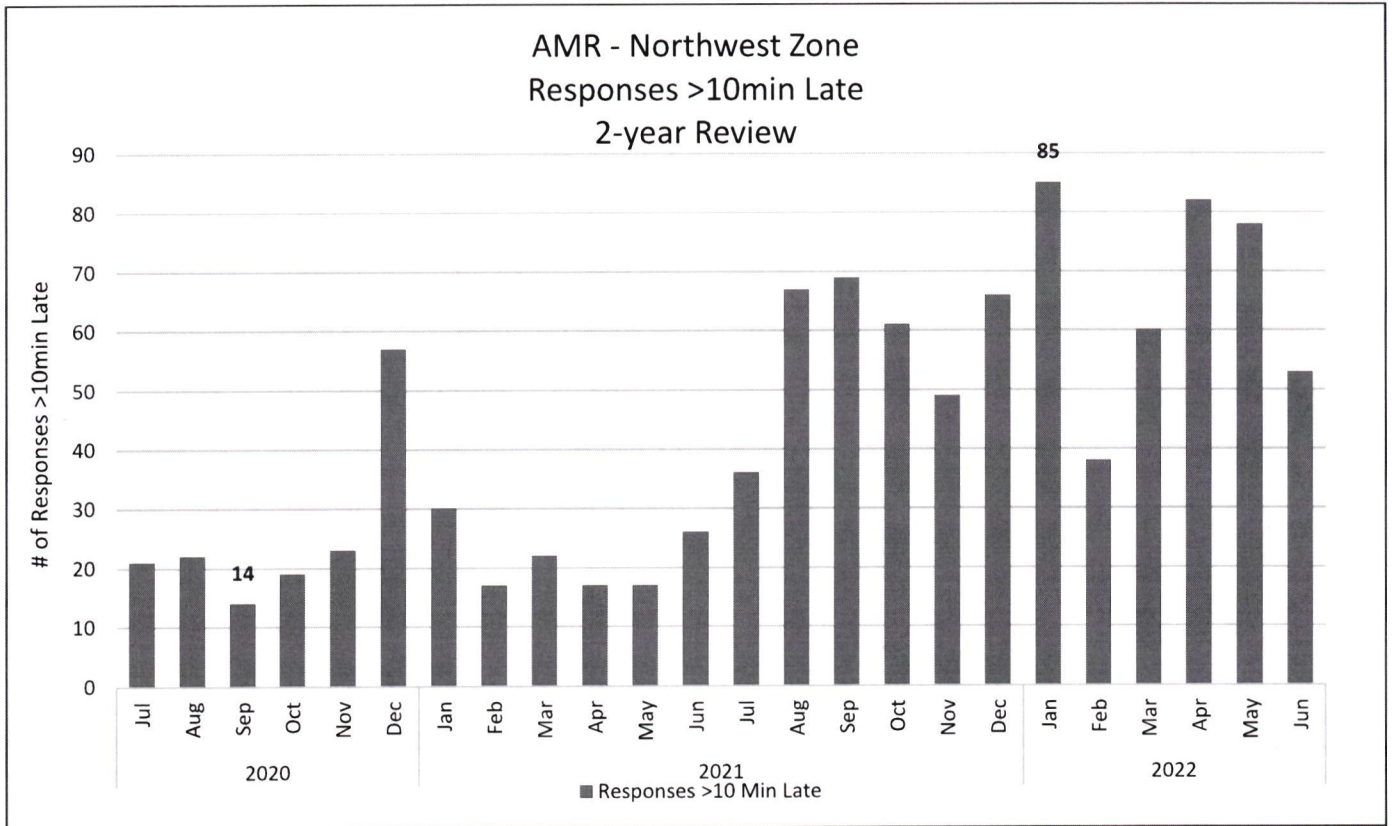
Northwest Zone: Subzone Response and Compliance Data (Cont'd)



Northwest Zone: Exemptions

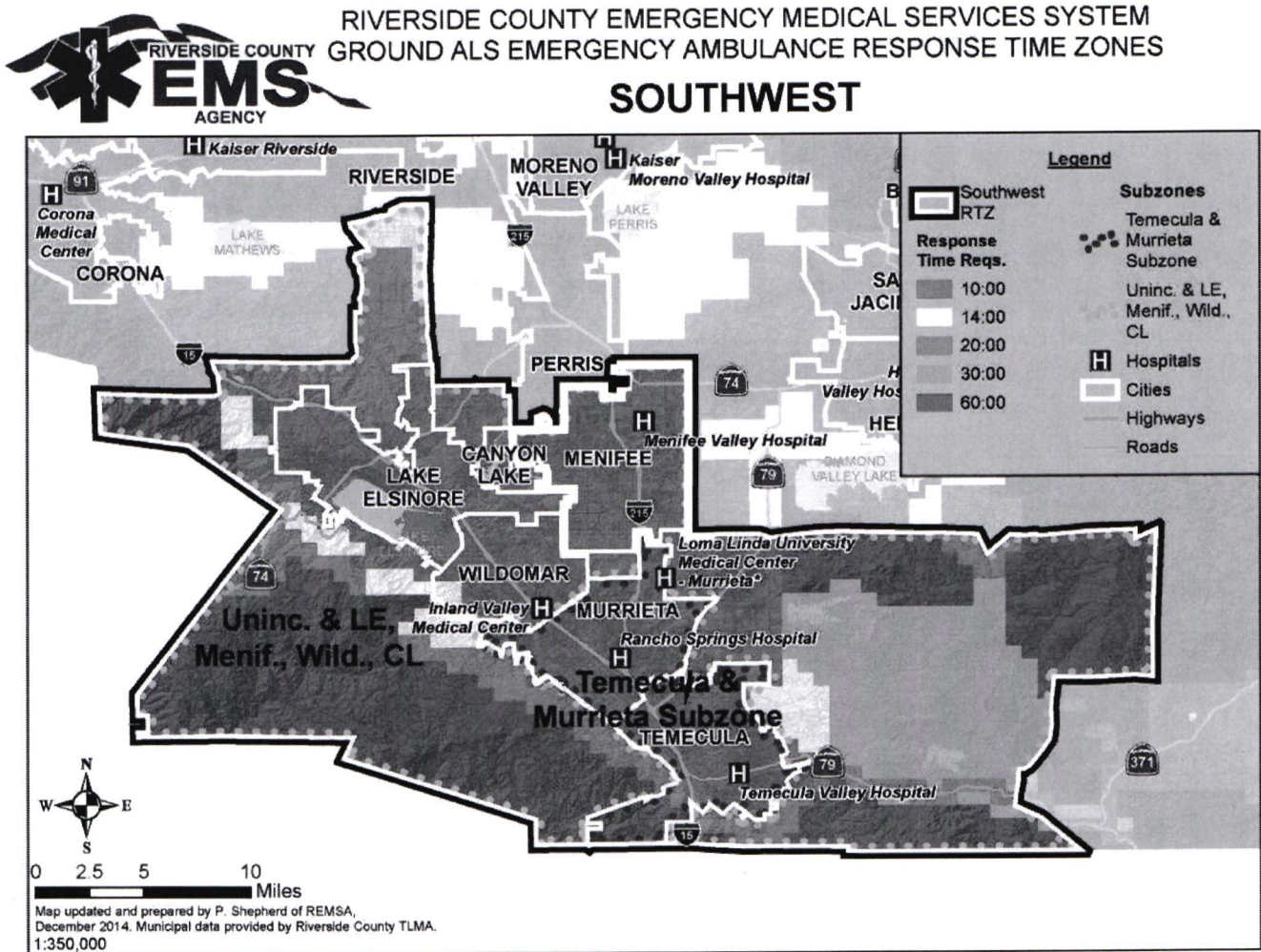


Northwest Zone: Responses >10 Minutes Late

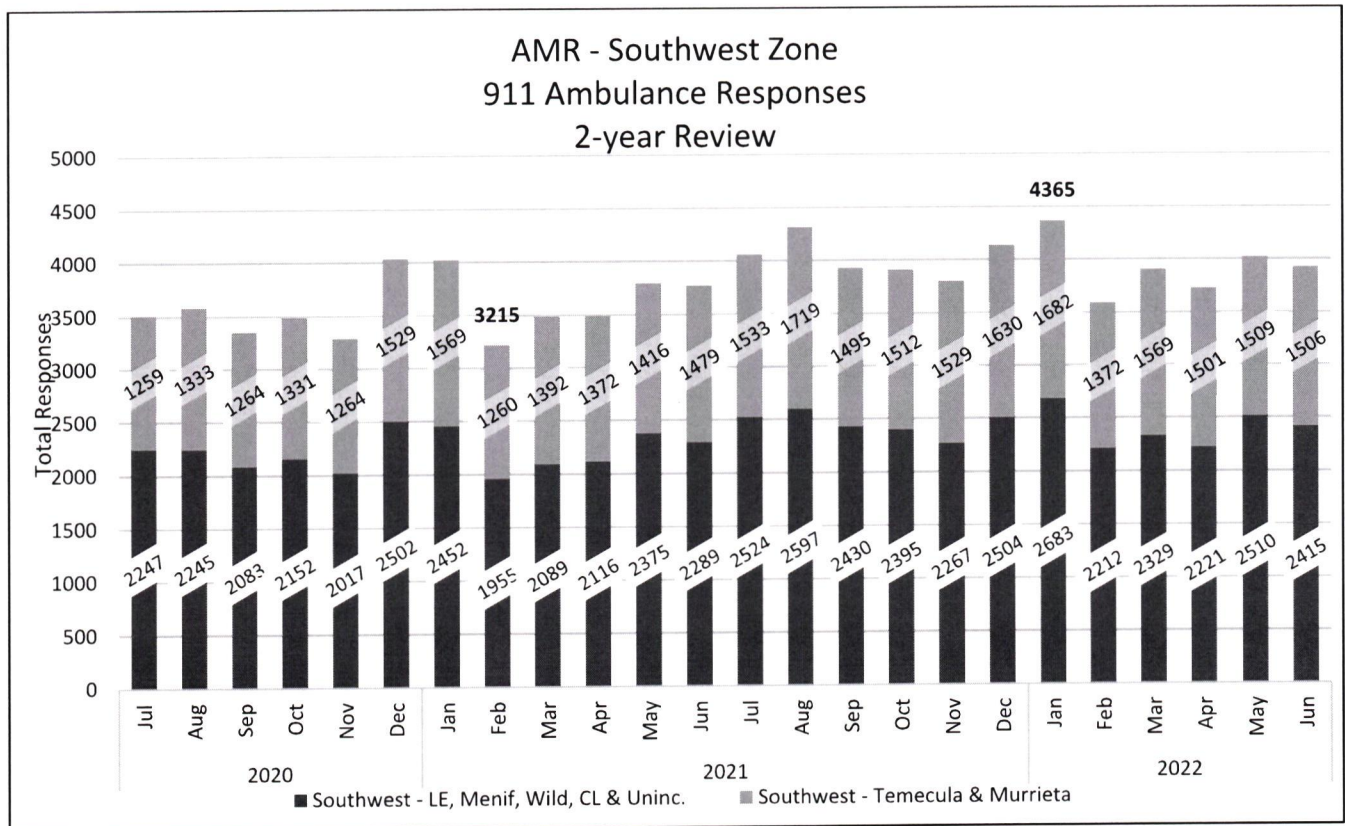
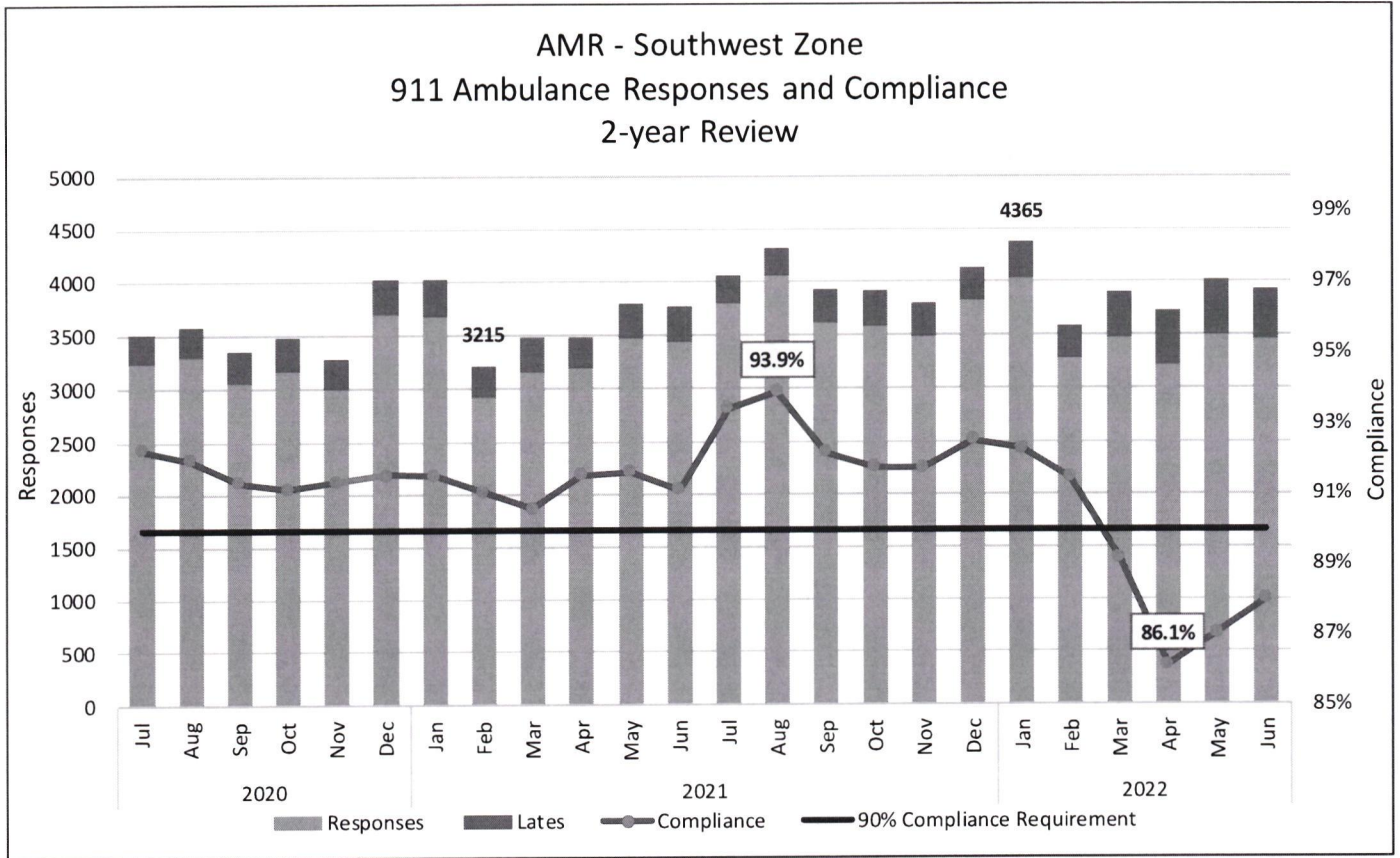


SOUTHWEST ZONE

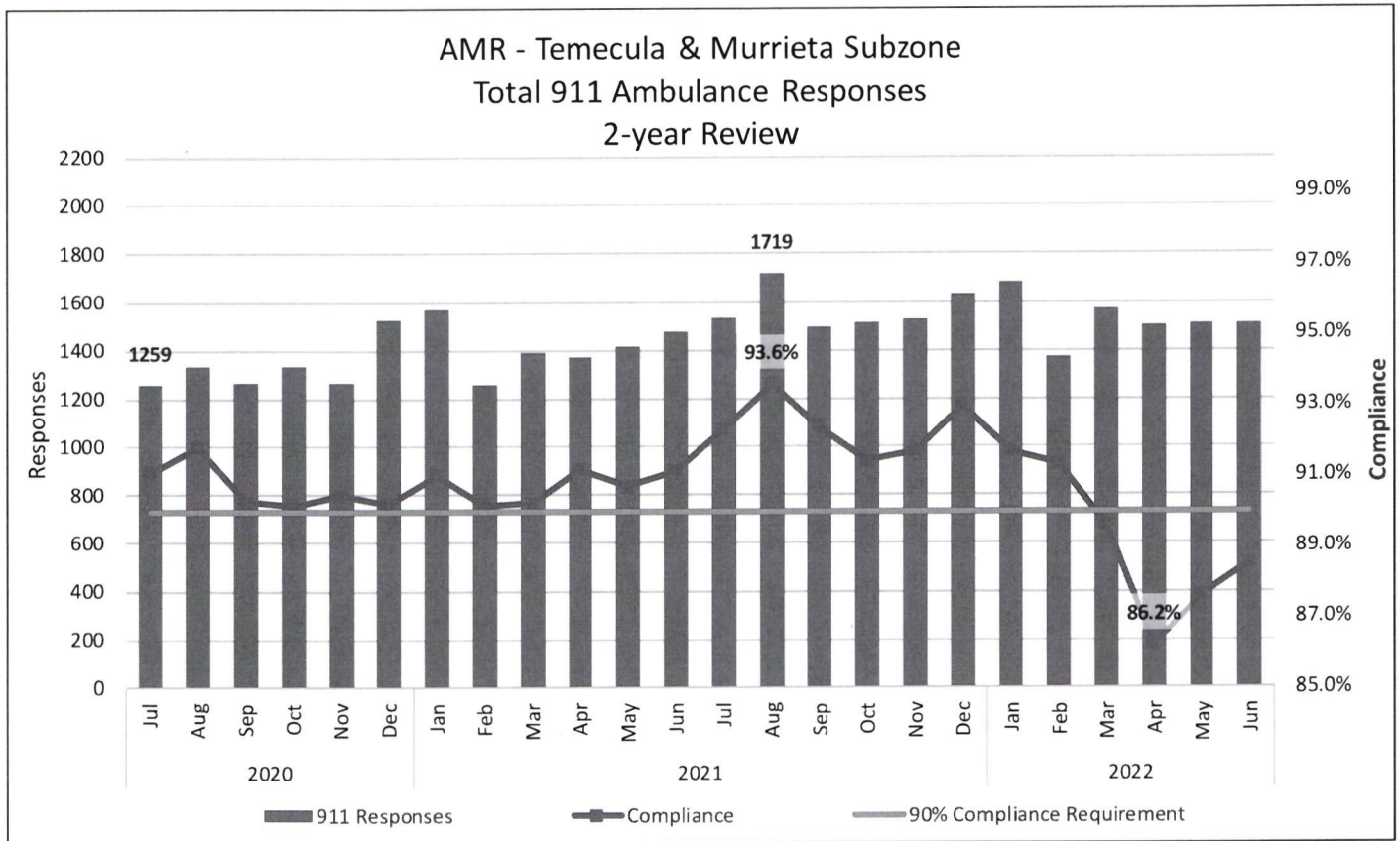
The Southwest Response Time Zone includes multiple cities, including: Temecula, Murrieta, Lake Elsinore, Menifee, Canyon Lake, and Wildomar. There are two subzones, which are the Temecula & Murrieta Subzone, and the Unincorporated Area plus Lake Elsinore, Wildomar, Canyon Lake and Menifee. The Southwest Zone borders the Northwest and Central Zones to the North, the San Jacinto Zone to the Northeast, and the Mountain Plateau Zone to the East.

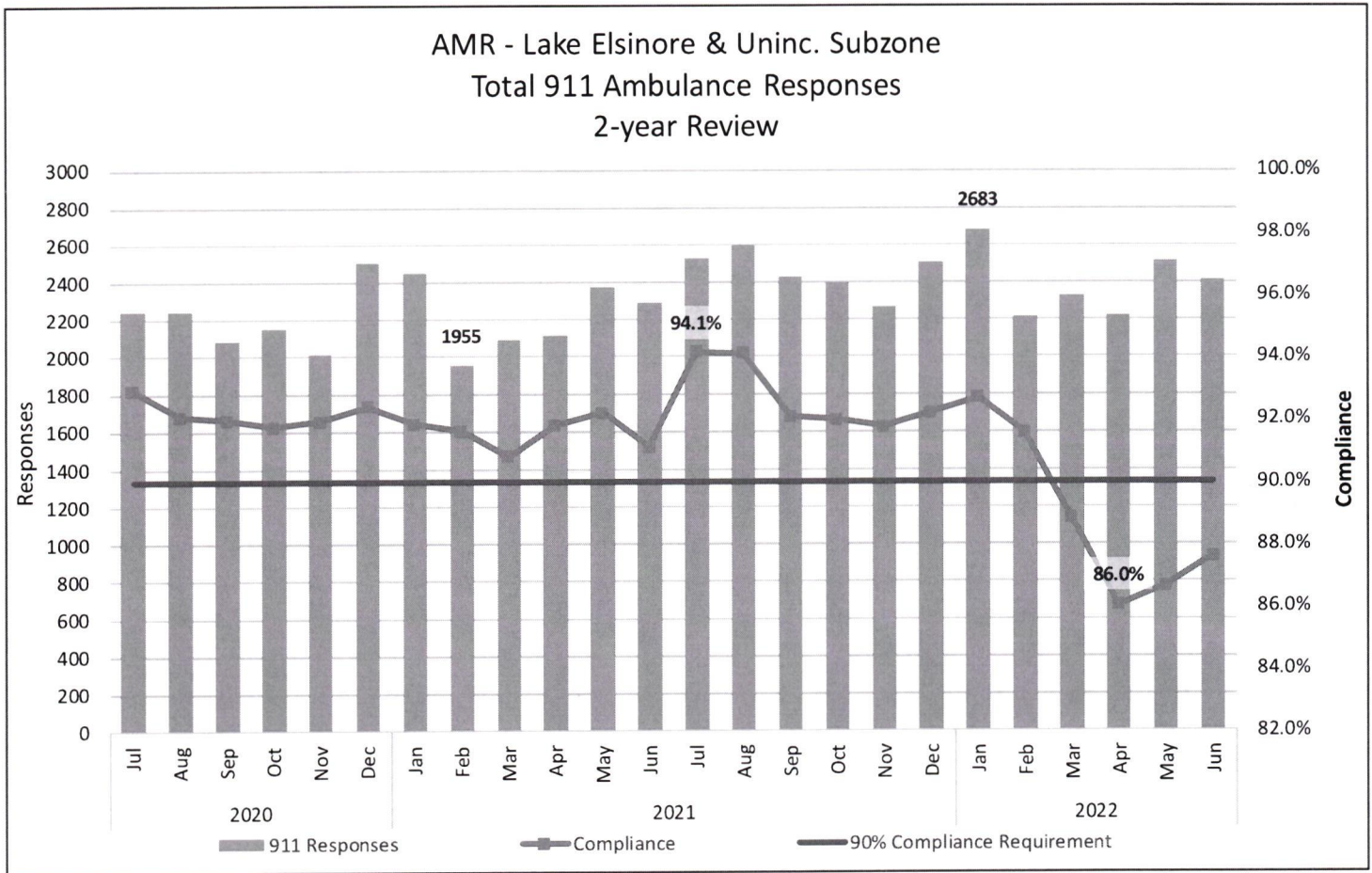


Southwest Zone: zone Response and Compliance Data

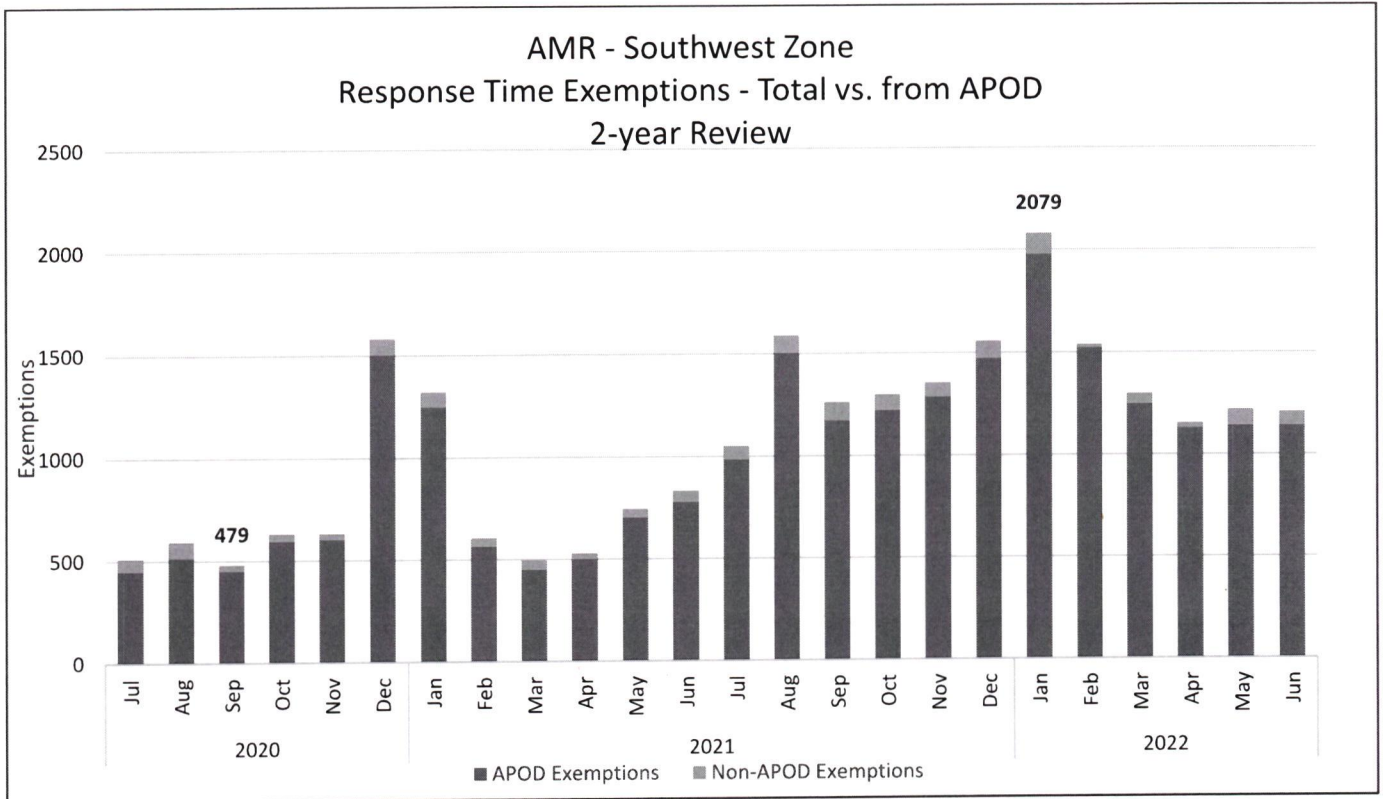


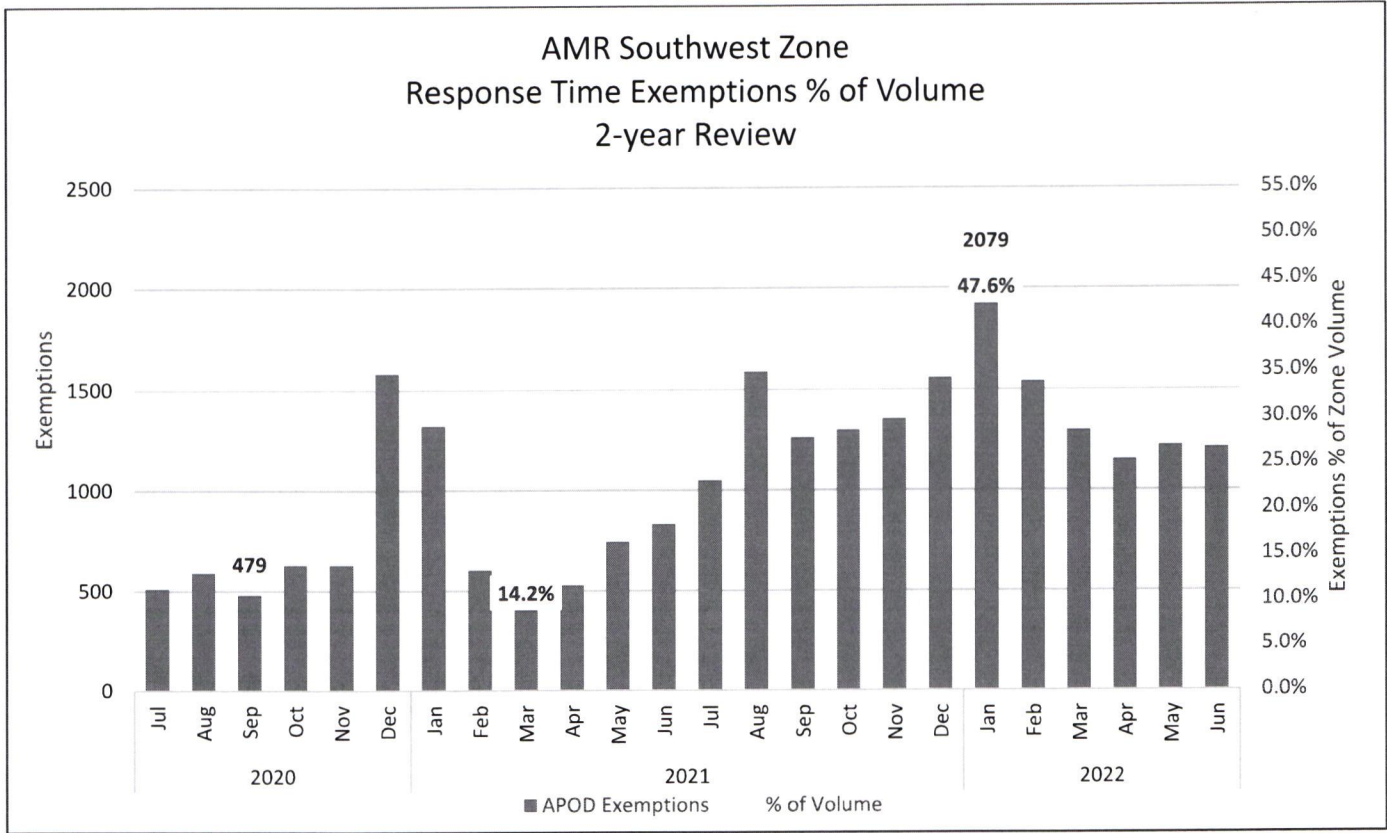
Southwest Zone: Subzone Response and Compliance Data



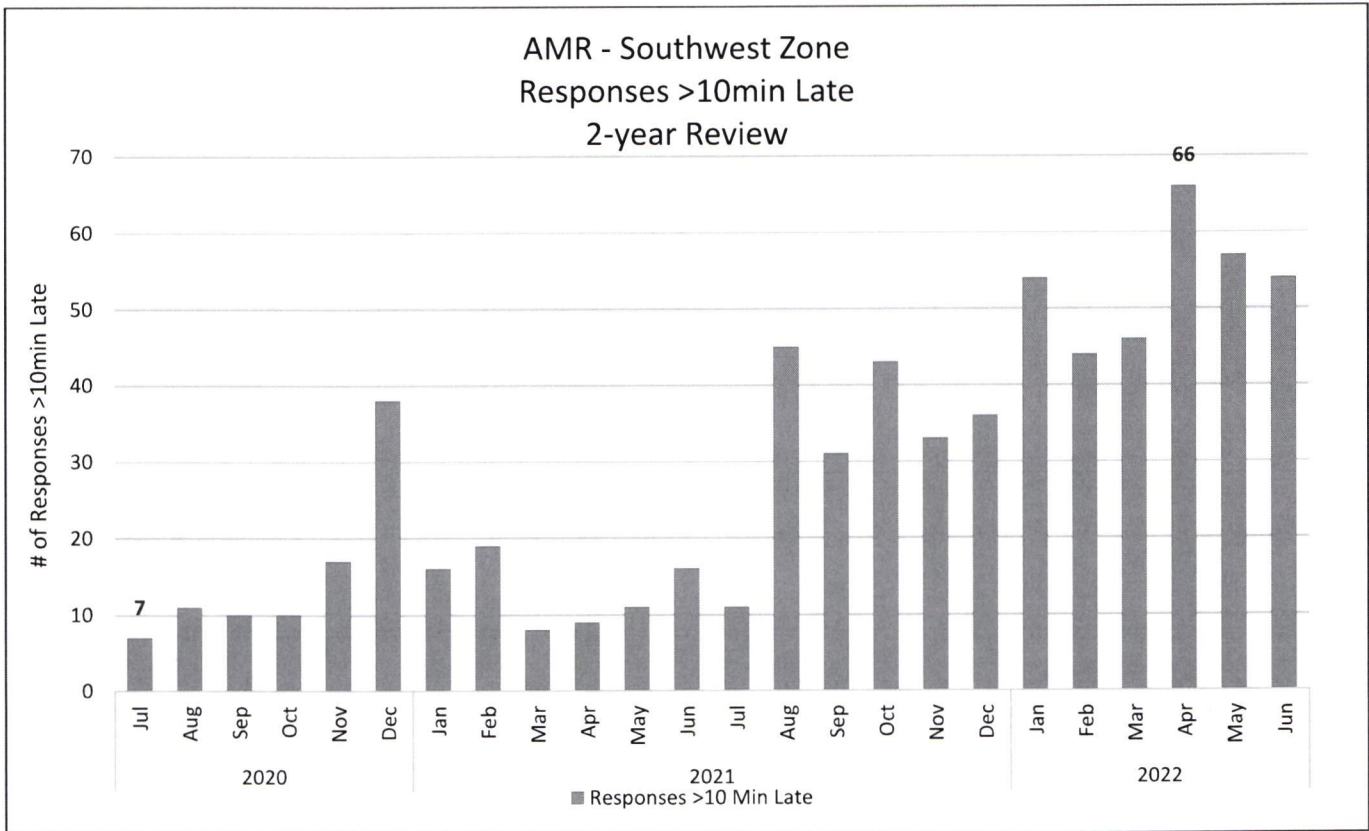


Southwest Zone: Exemptions





Southwest Zone: Responses > 10 Minutes Late

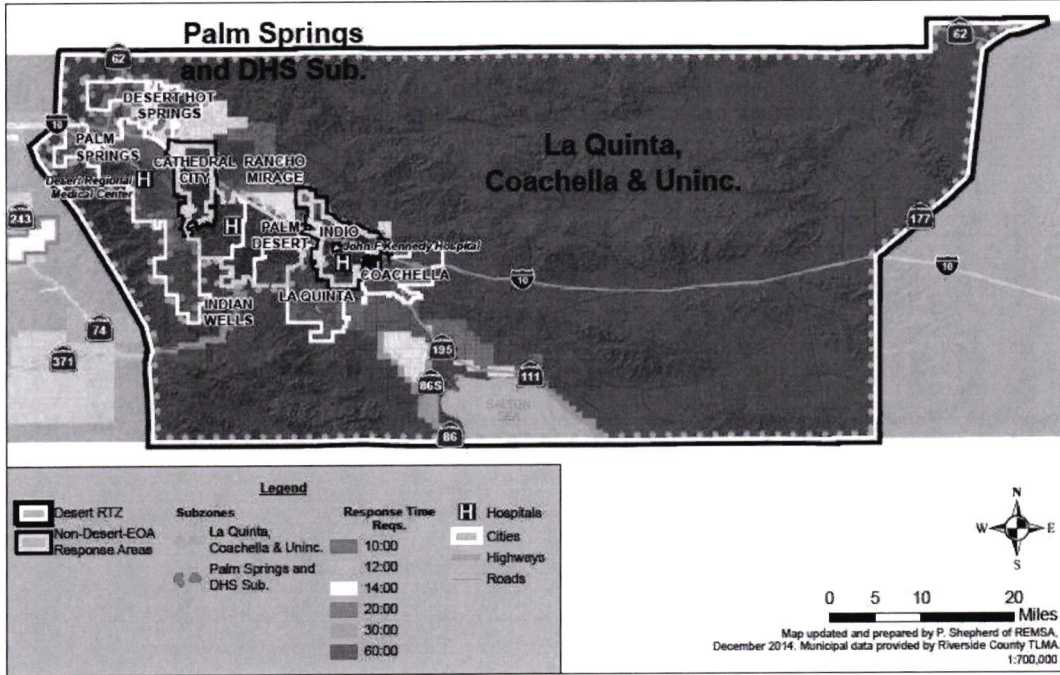


DESERT ZONE



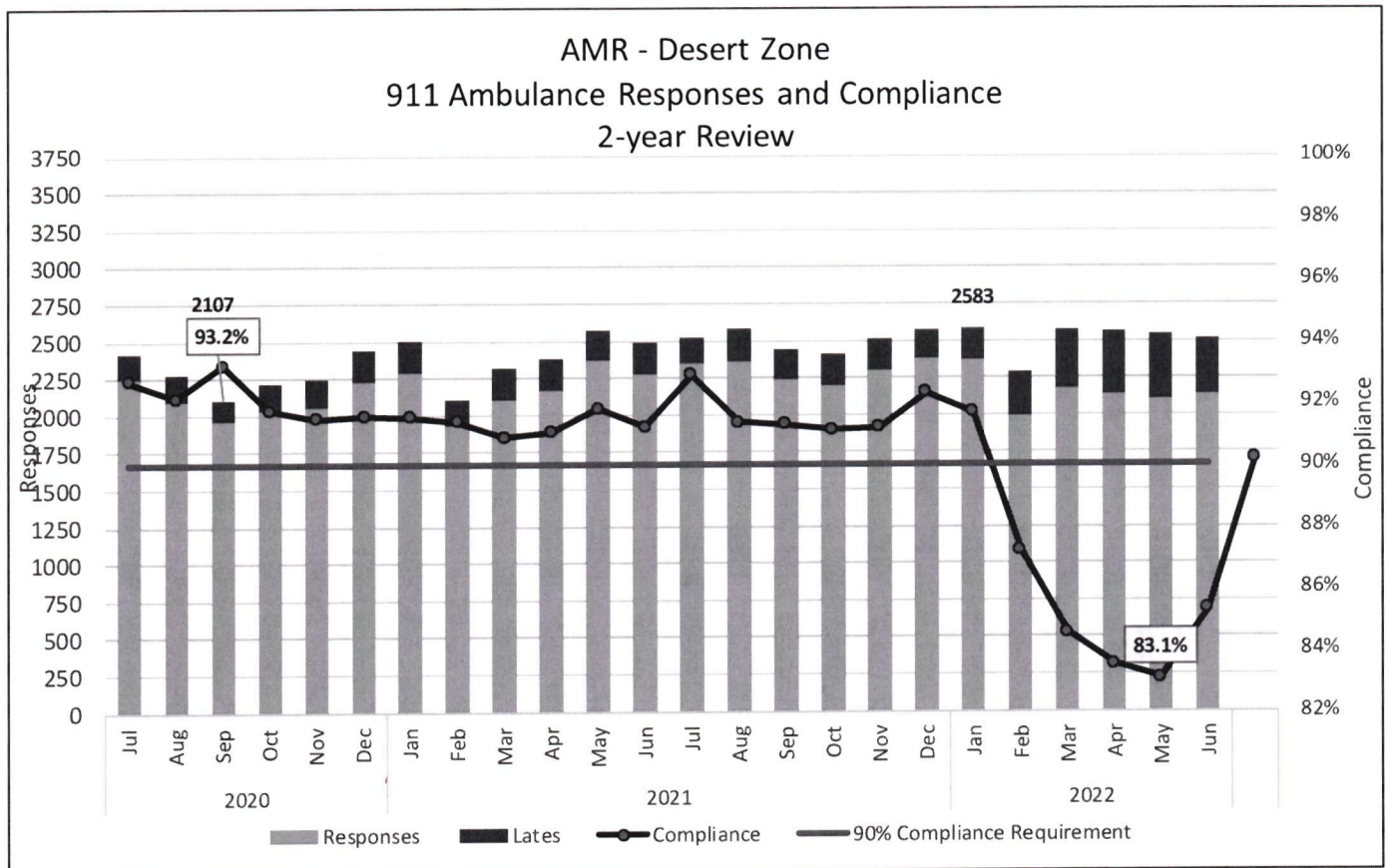
RIVERSIDE COUNTY EMERGENCY MEDICAL SERVICES SYSTEM
GROUND ALS EMERGENCY AMBULANCE RESPONSE TIME ZONES

DESERT

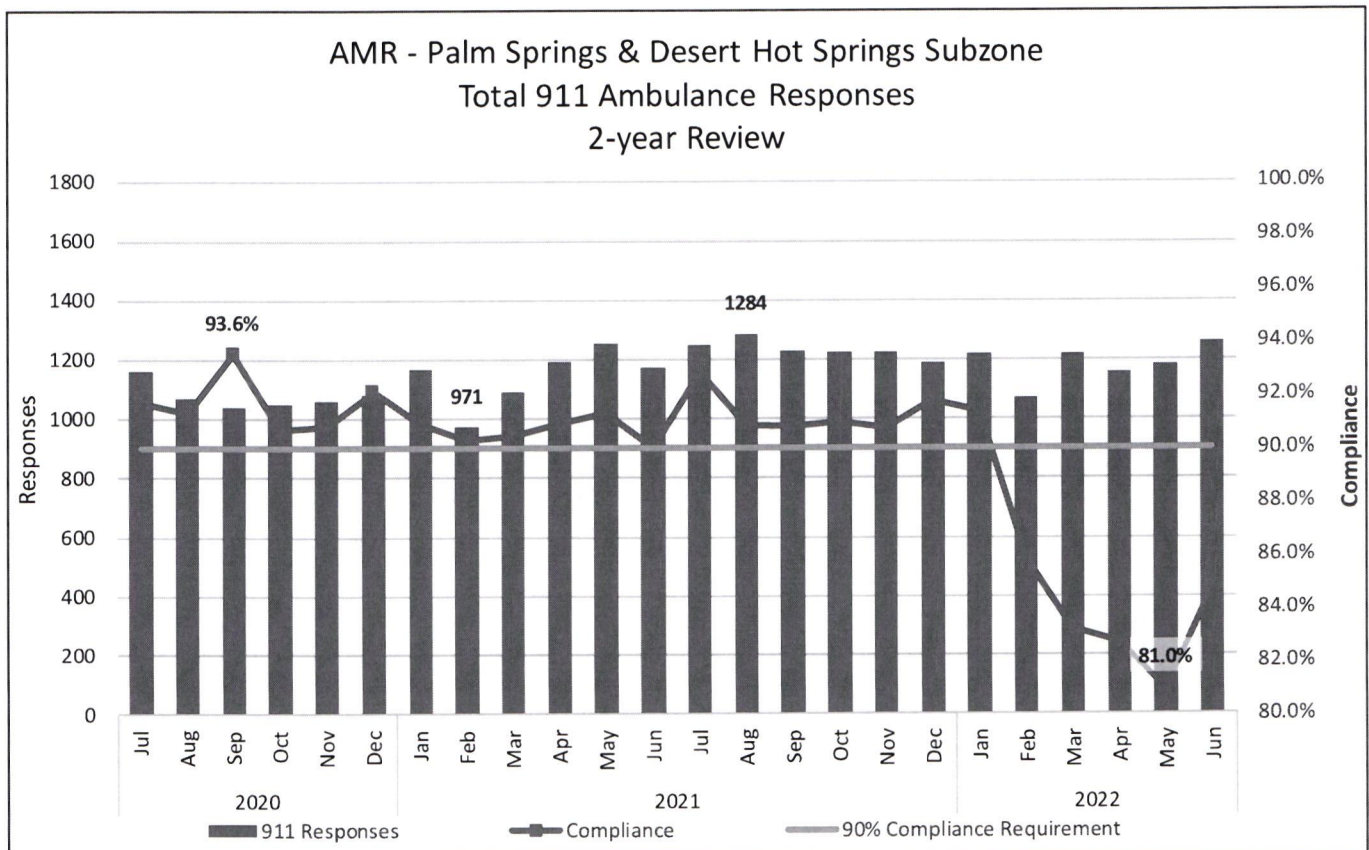
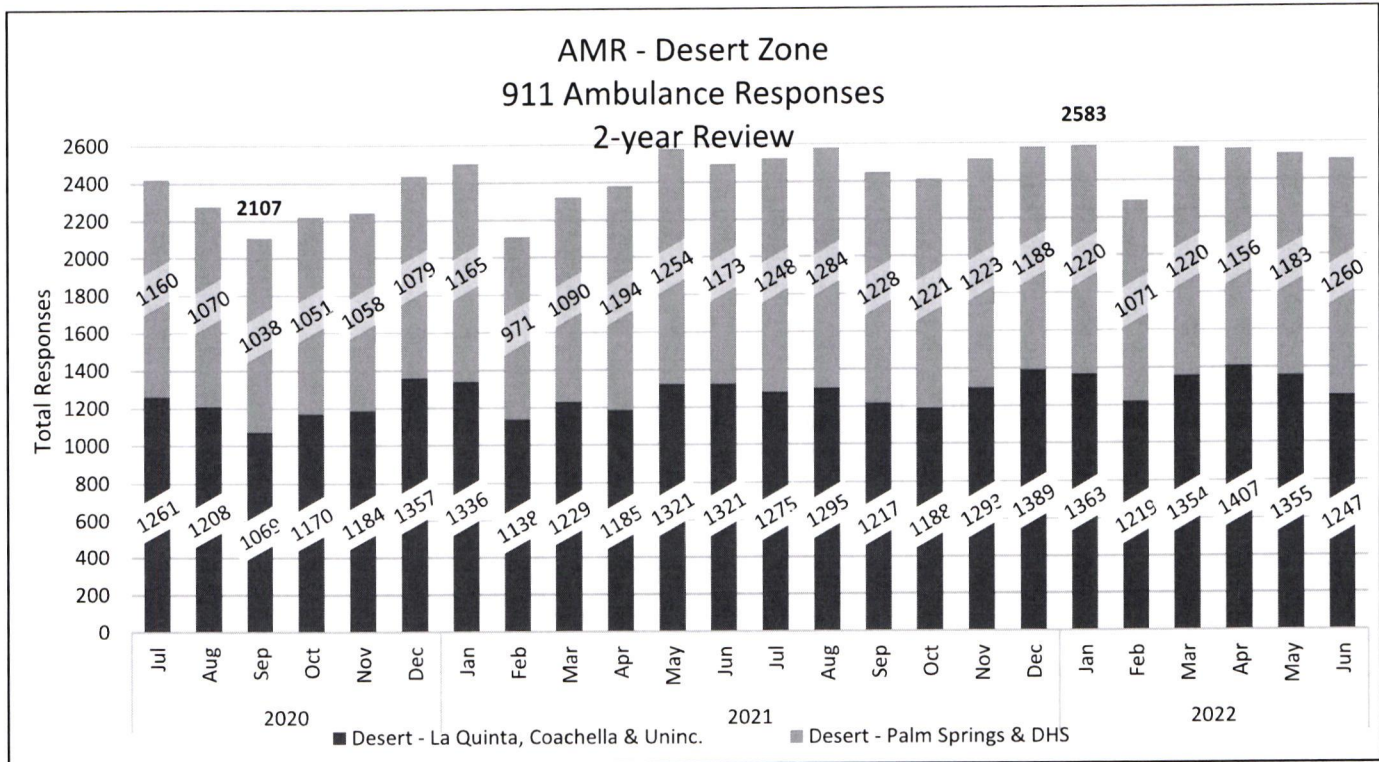


The Desert Ambulance Operating Area includes the Desert Zone response criteria, which include ten-minute requirements in the cities under contract and up to sixty minutes for the most rural areas of the response zone.

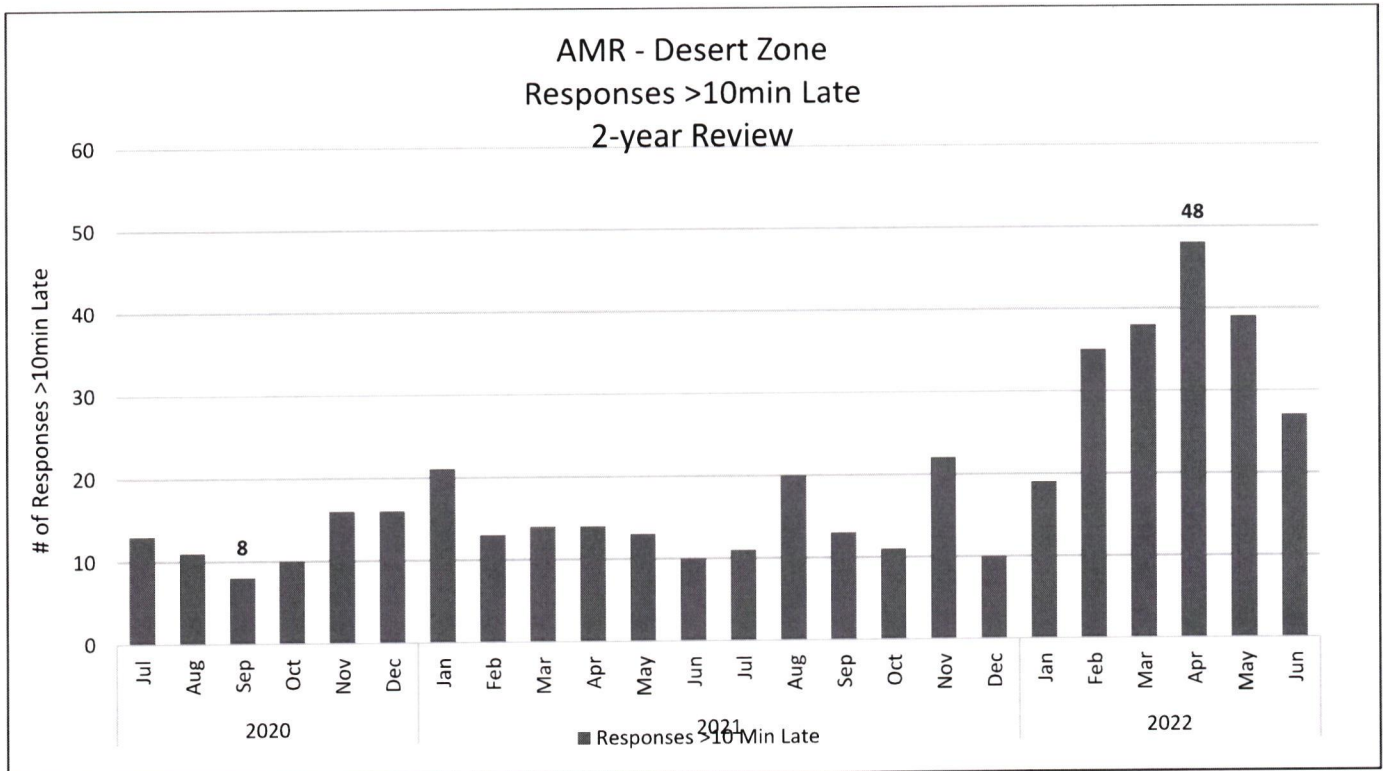
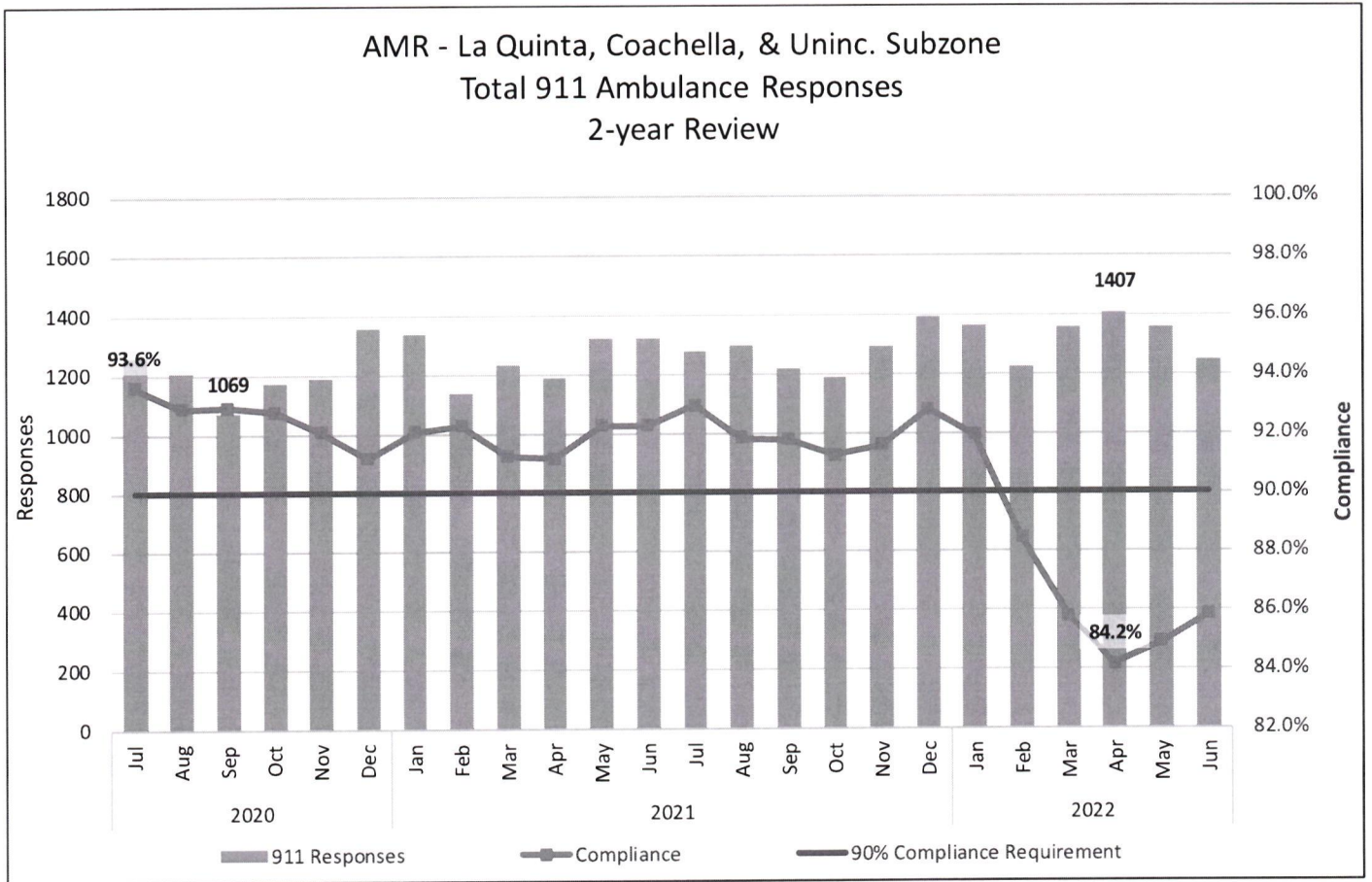
Palo Verde zone responses are now being coordinated through the Desert Zone's AMR Desert Cities operations. A comparison of the East County zones is available on page six of this report.



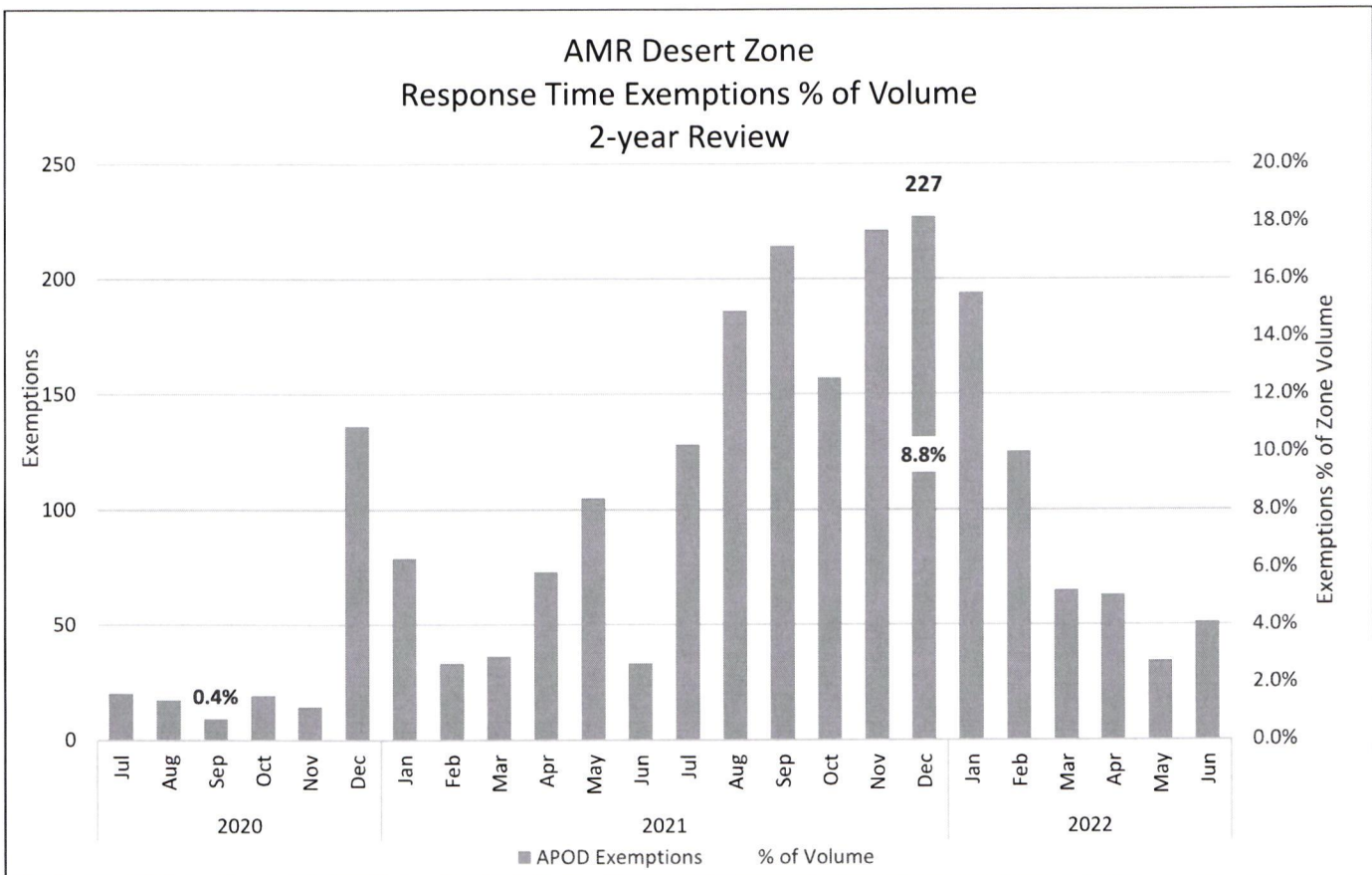
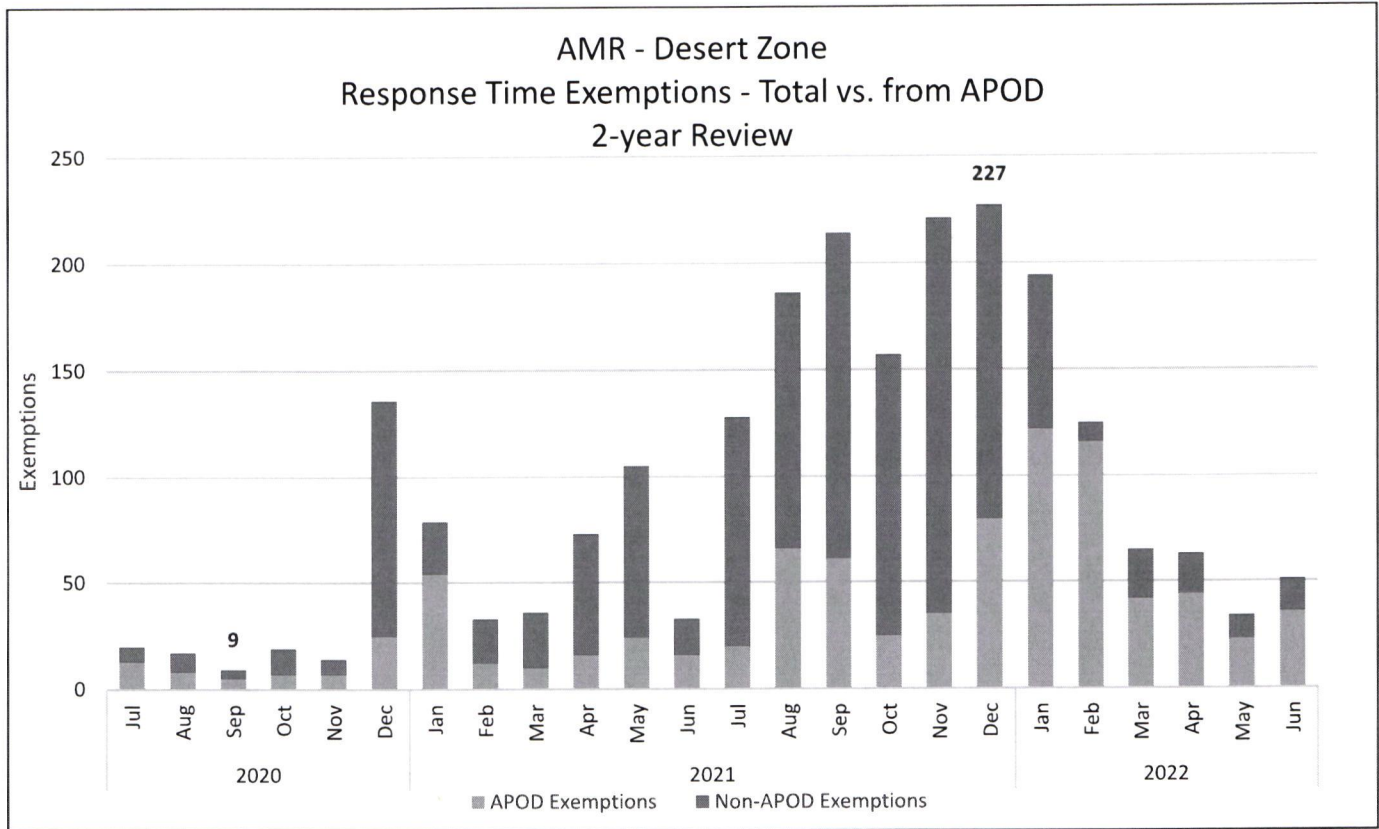
Desert Zone: Subzone Response and Compliance Data



Desert Zone: Subzones Cont'd. and Responses >10 Minutes Late



Desert Zone: Exemptions



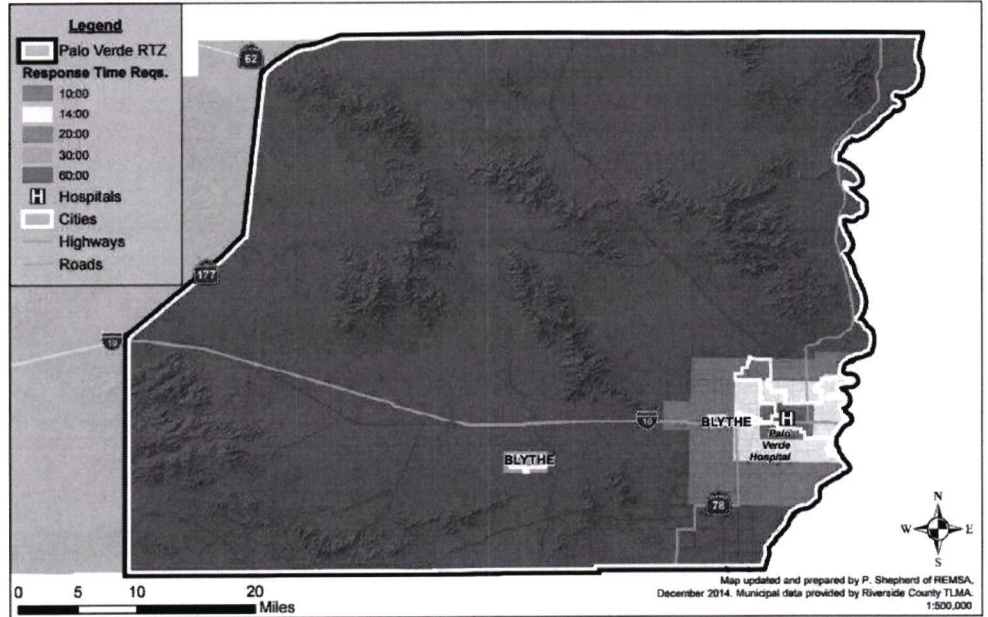
PALO VERDE ZONE



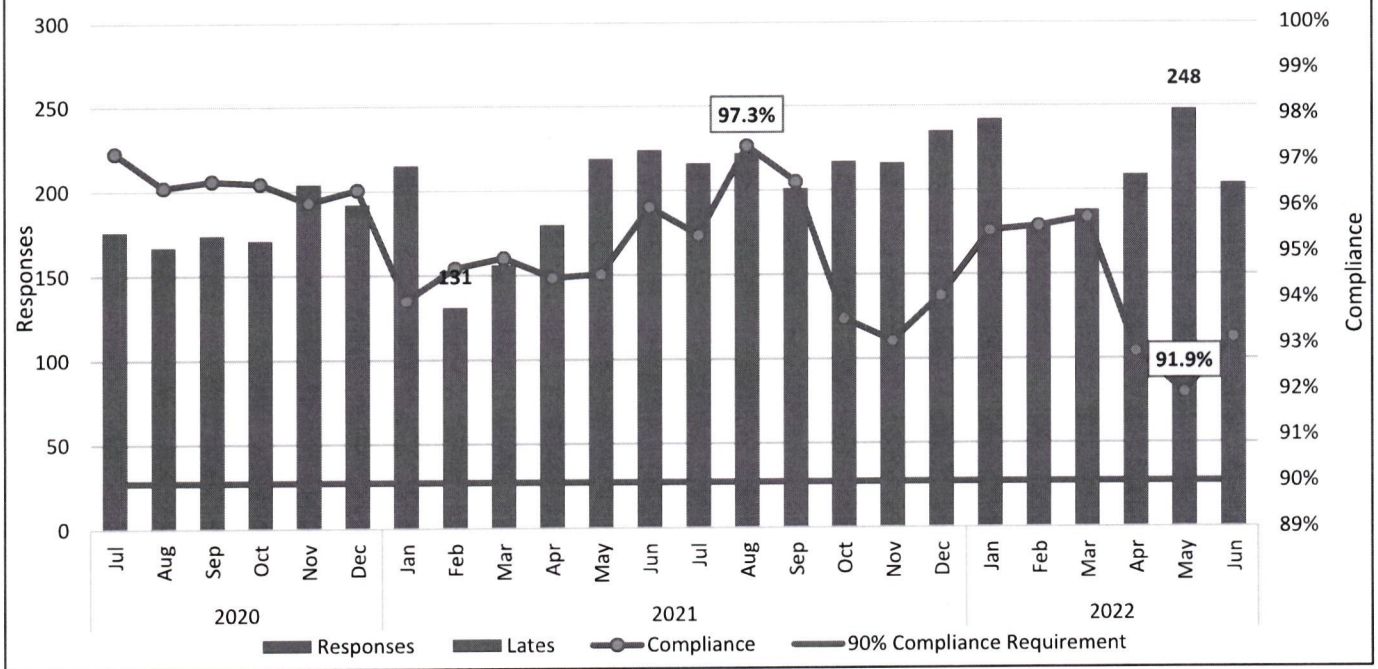
RIVERSIDE COUNTY EMERGENCY MEDICAL SERVICES SYSTEM
GROUND ALS EMERGENCY RESPONSE TIME ZONES

PALO VERDE

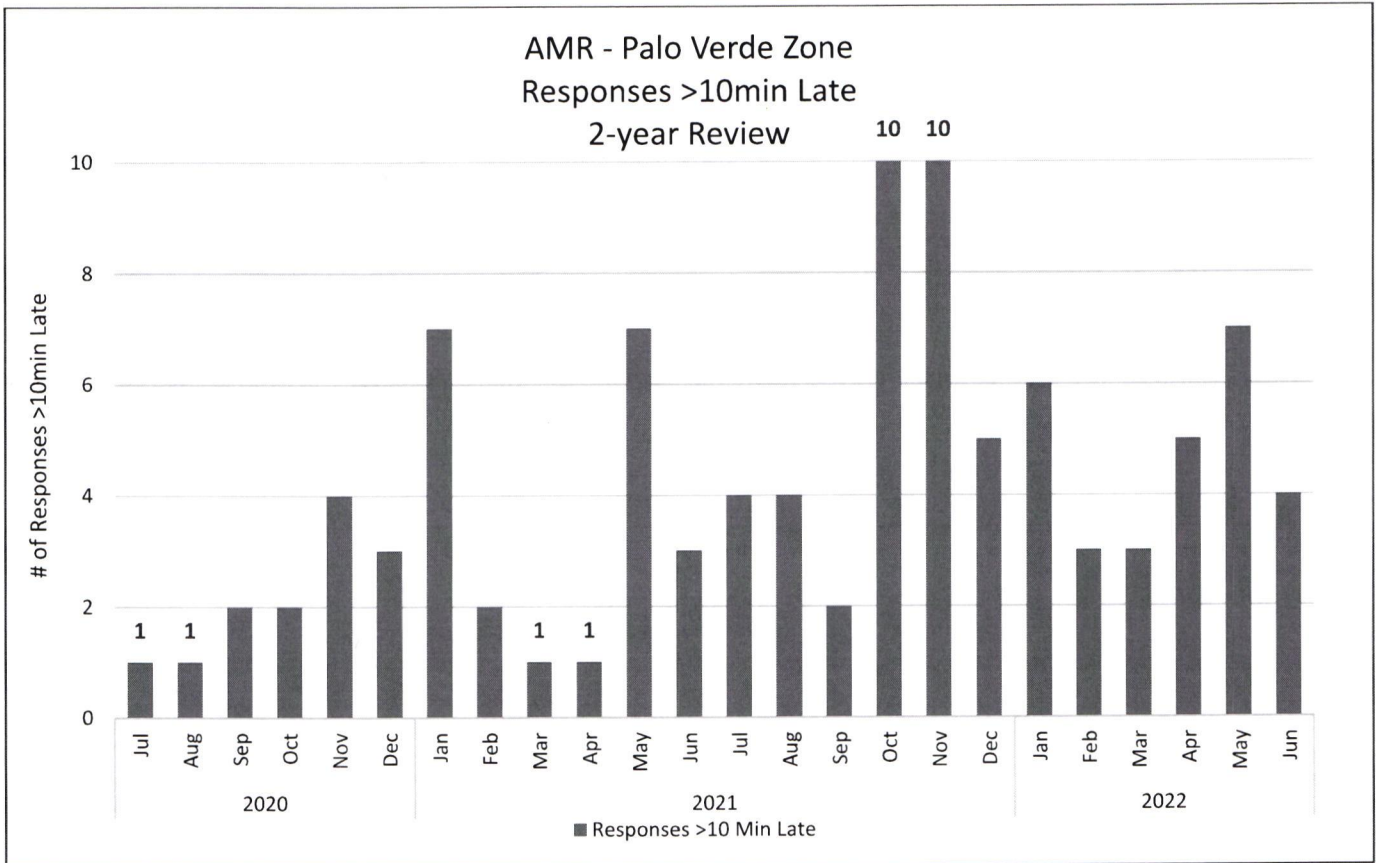
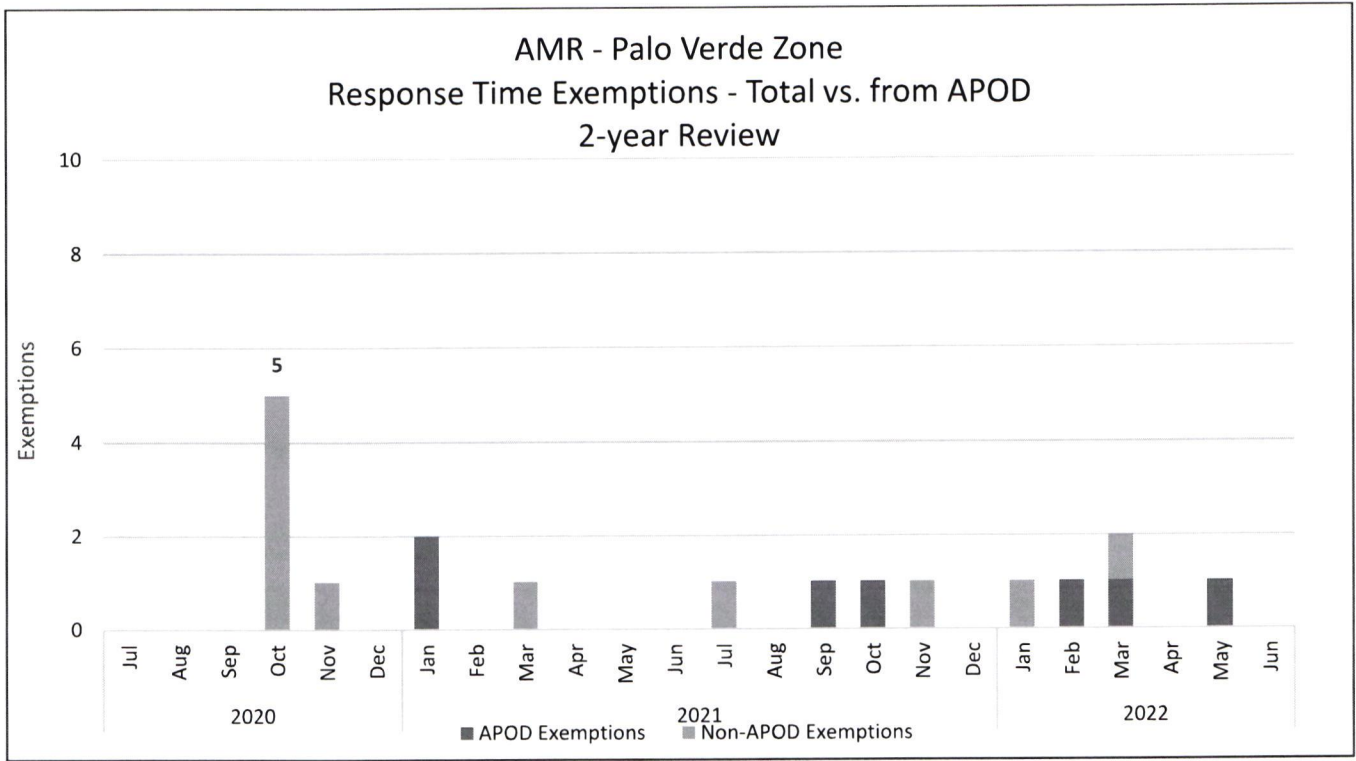
The Palo Verde Response Time Zone includes the County areas East of the Desert Zone. It also encompasses the city of Blythe and Chuckawalla State Prison, and is dispatched from the AMR Desert Cities Operations in the Desert Zone.



AMR - Palo Verde Zone
911 Ambulance Responses and Compliance
2-year Review



Palo Verde Zone: Exemptions and >10 Minutes Late

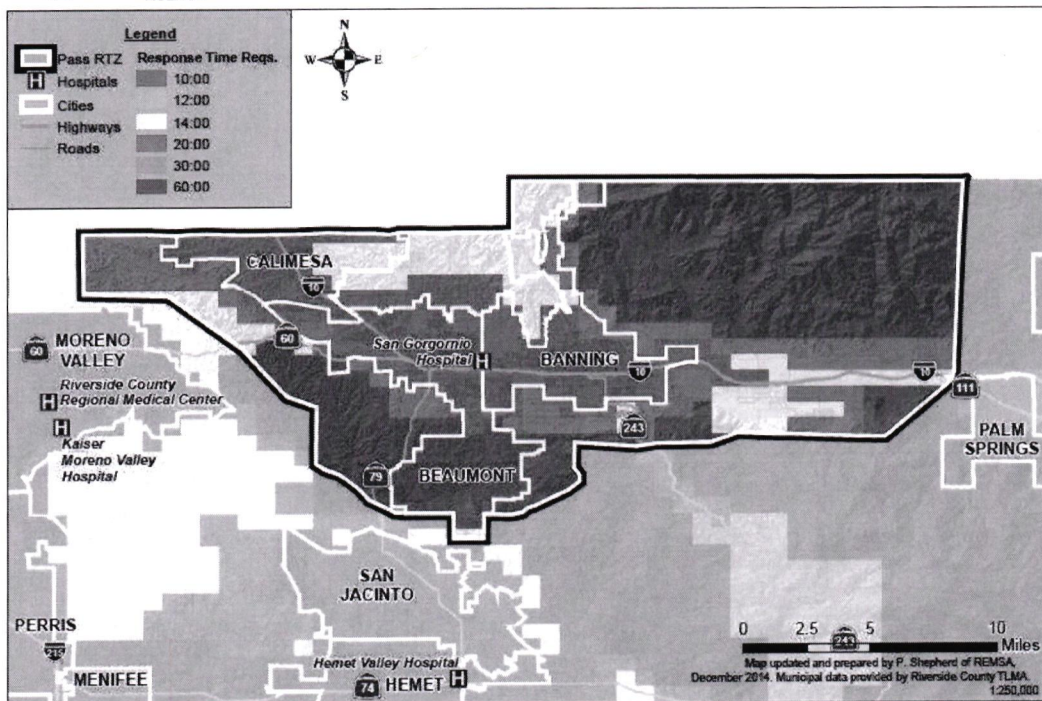


PASS ZONE

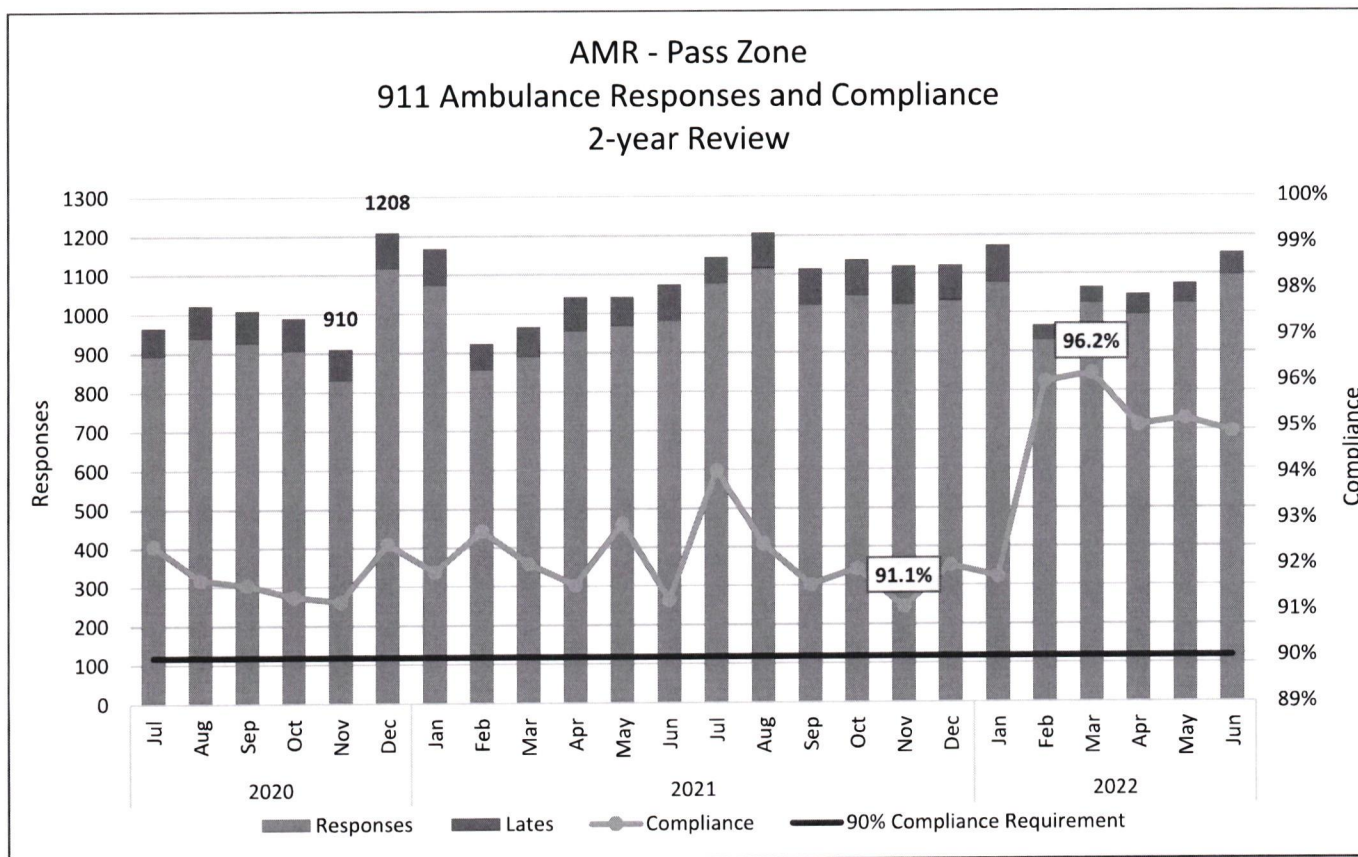


RIVERSIDE COUNTY EMERGENCY MEDICAL SERVICES SYSTEM
GROUND ALS EMERGENCY AMBULANCE RESPONSE TIME ZONES

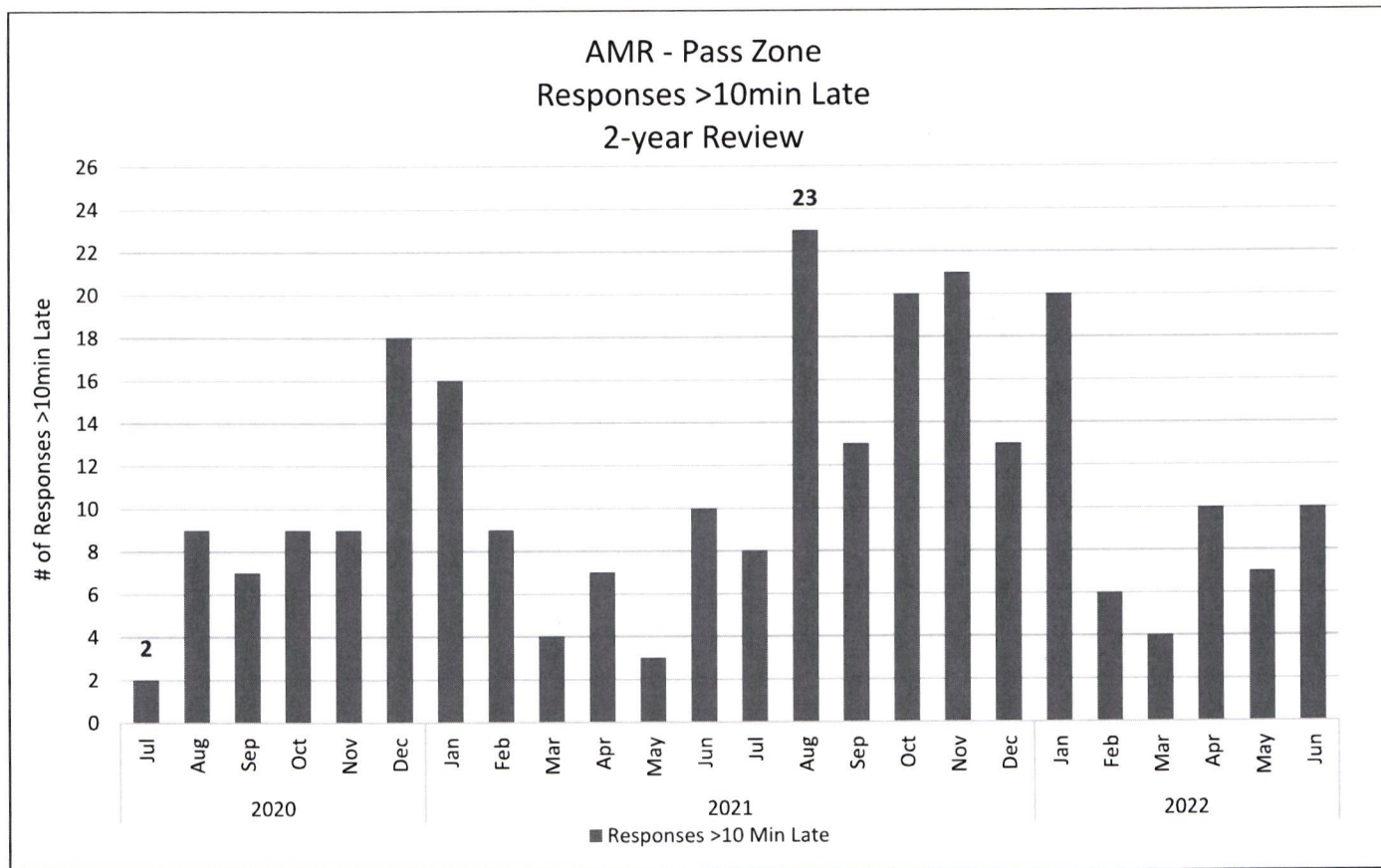
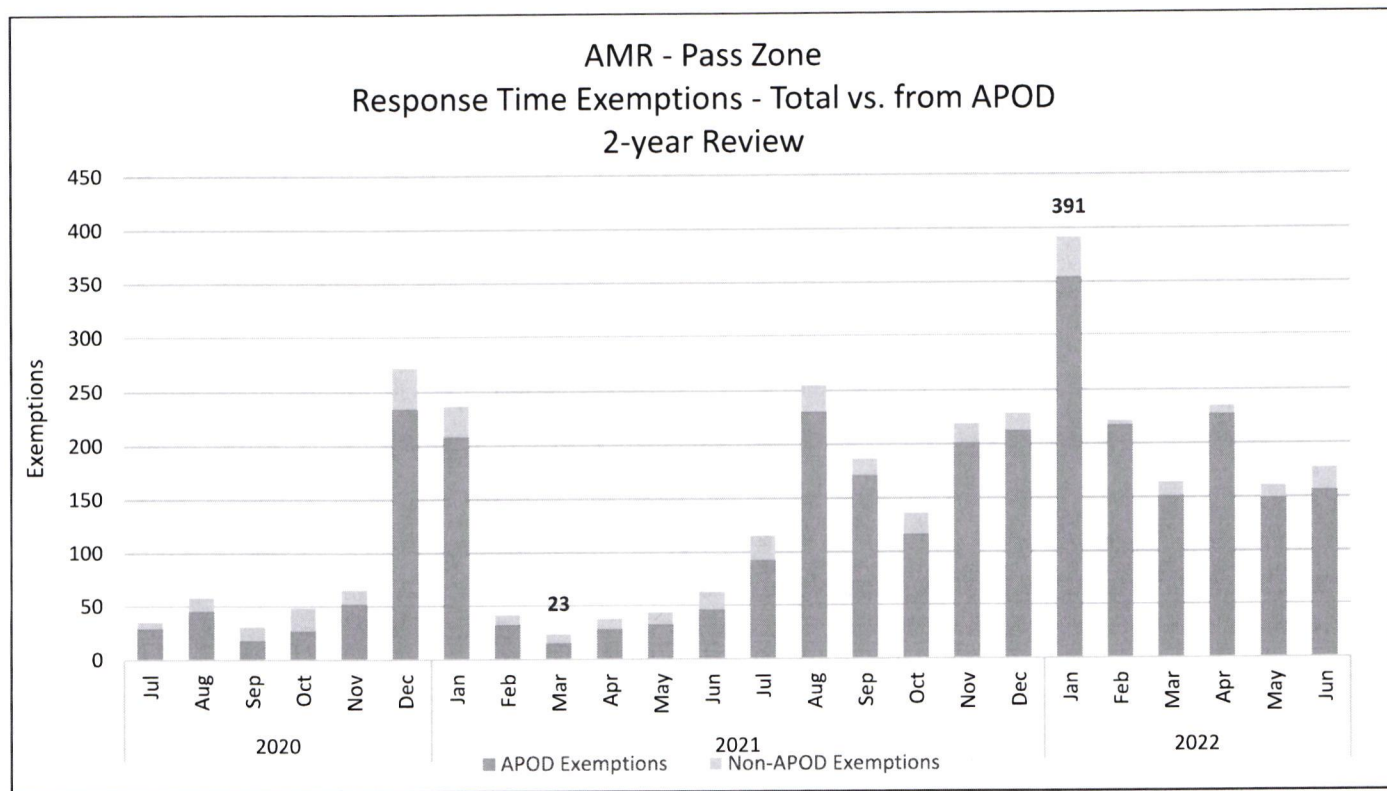
PASS



The Pass Response Time Zone includes the cities of Banning, Beaumont, and Calimesa, and also surrounds a large section of Interstate 10. The zone contains one hospital, and averages 905 9-1-1 responses per month, with an average of 69 late calls per month during the period covered in this report.

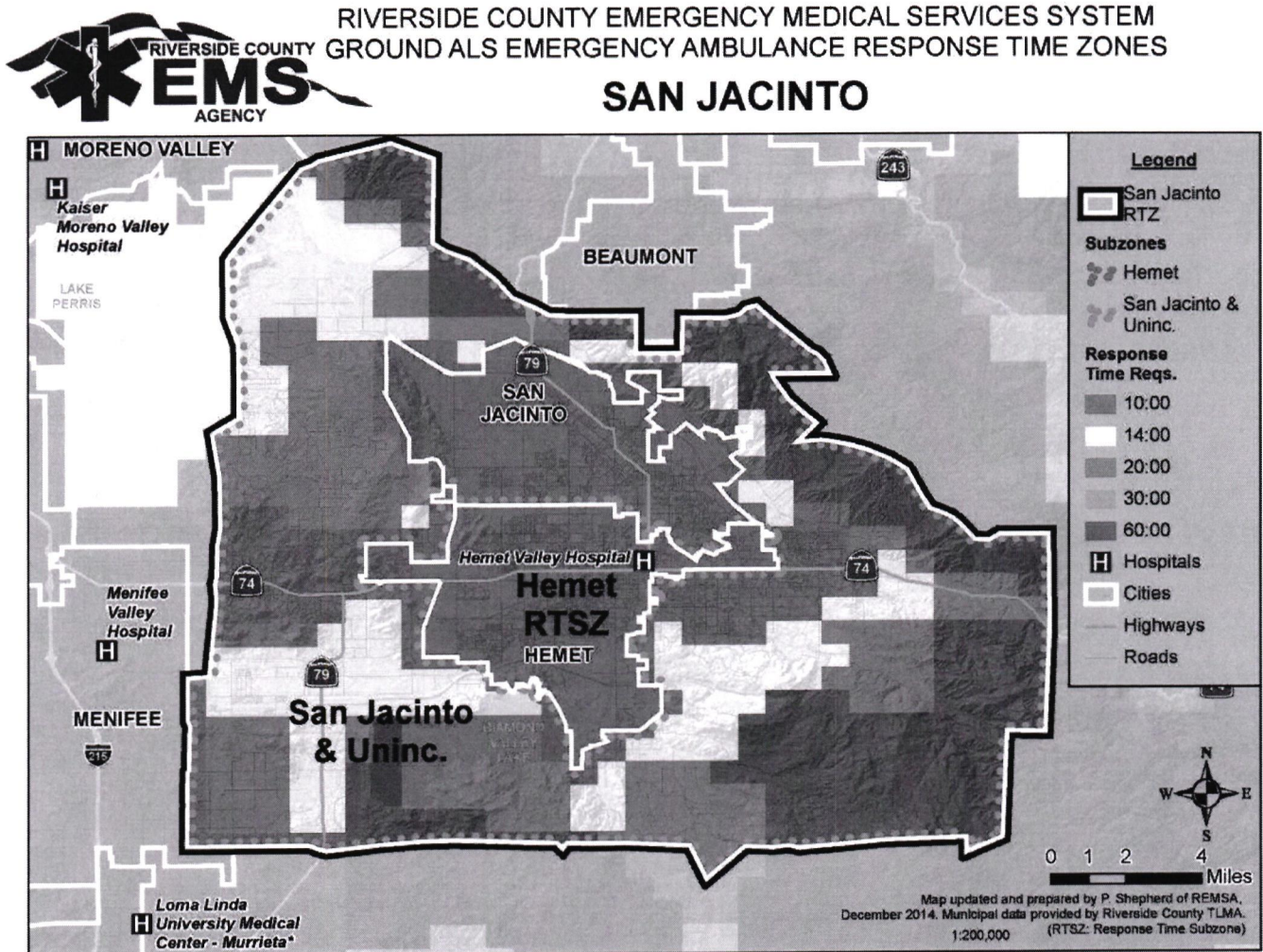


Pass Zone: Exemptions and Responses >10 Minutes Late

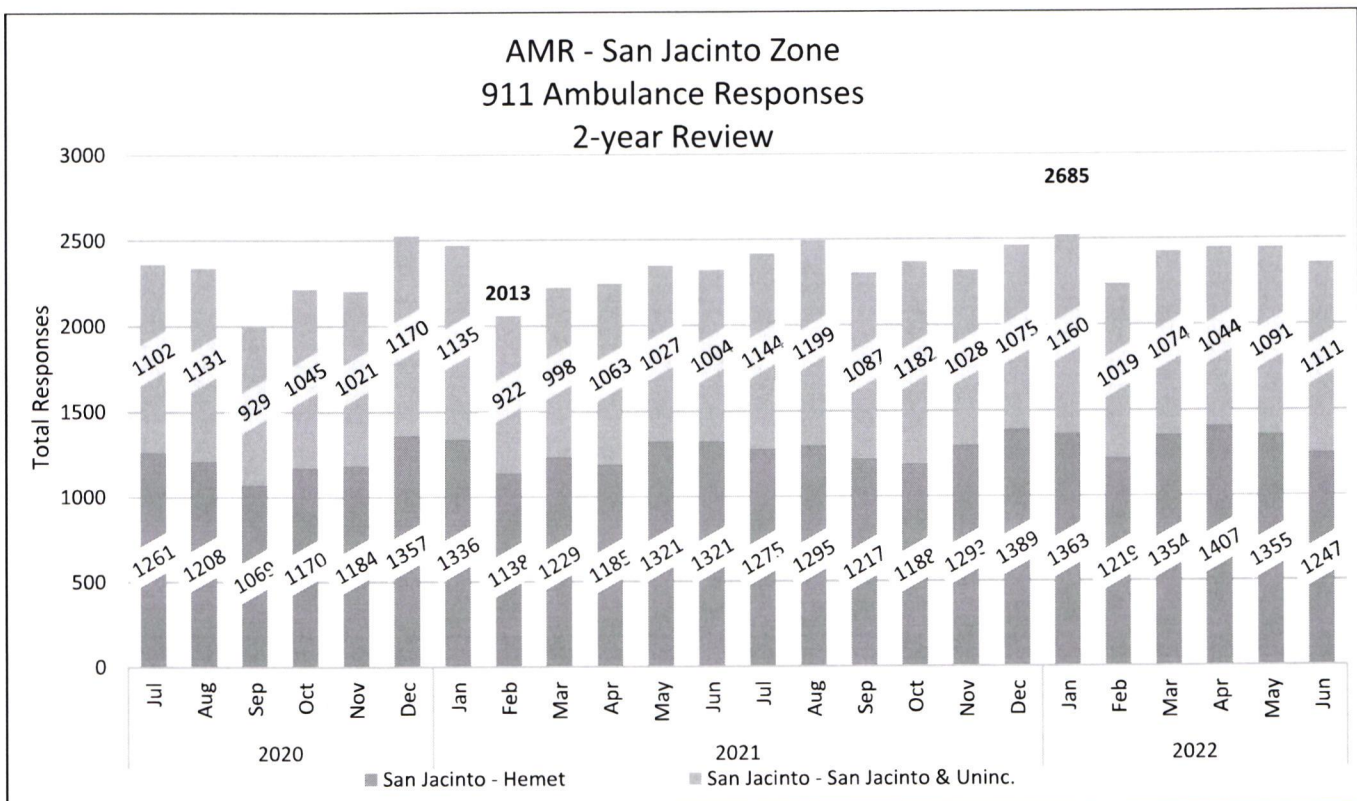
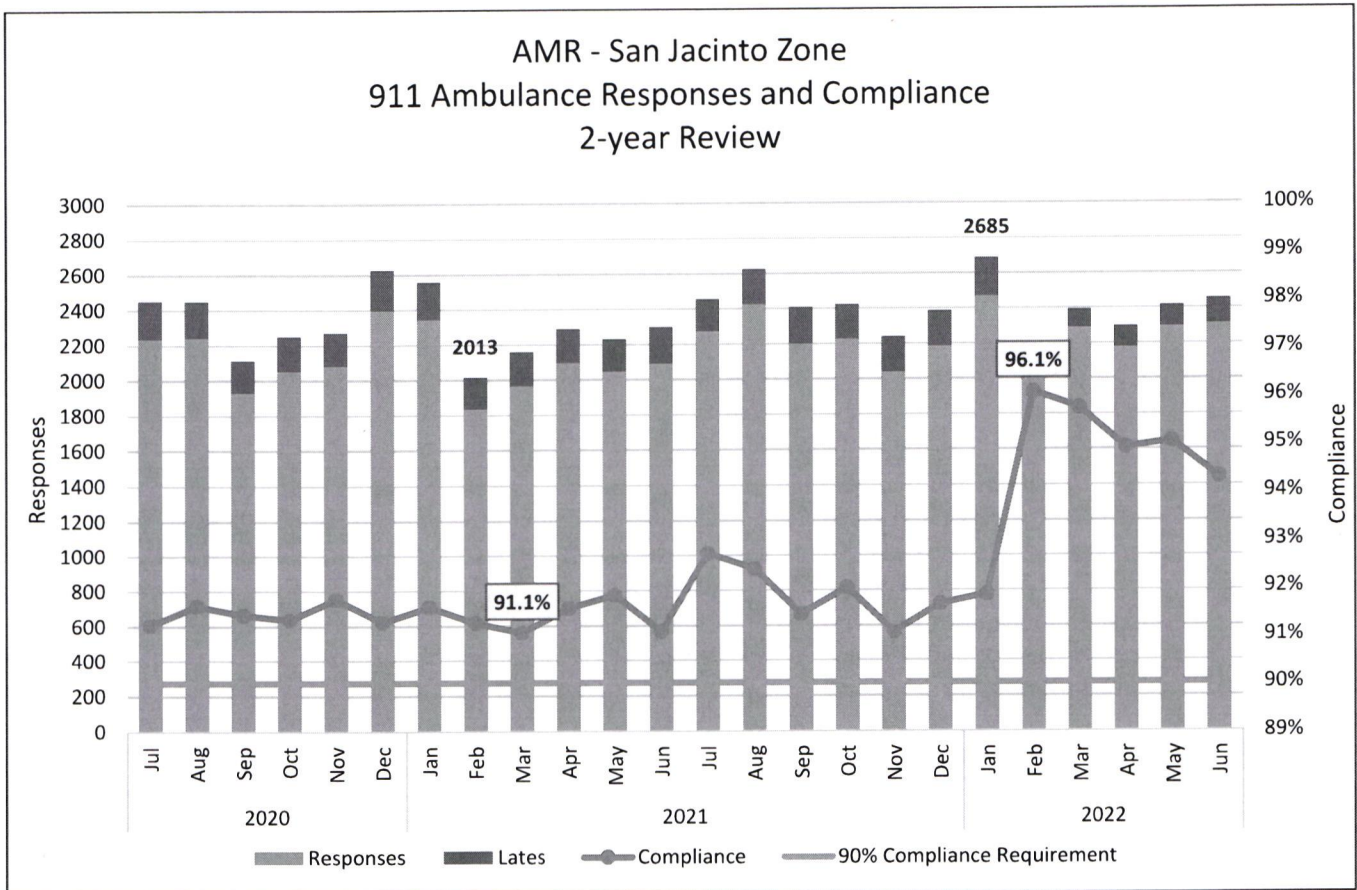


SAN JACINTO ZONE

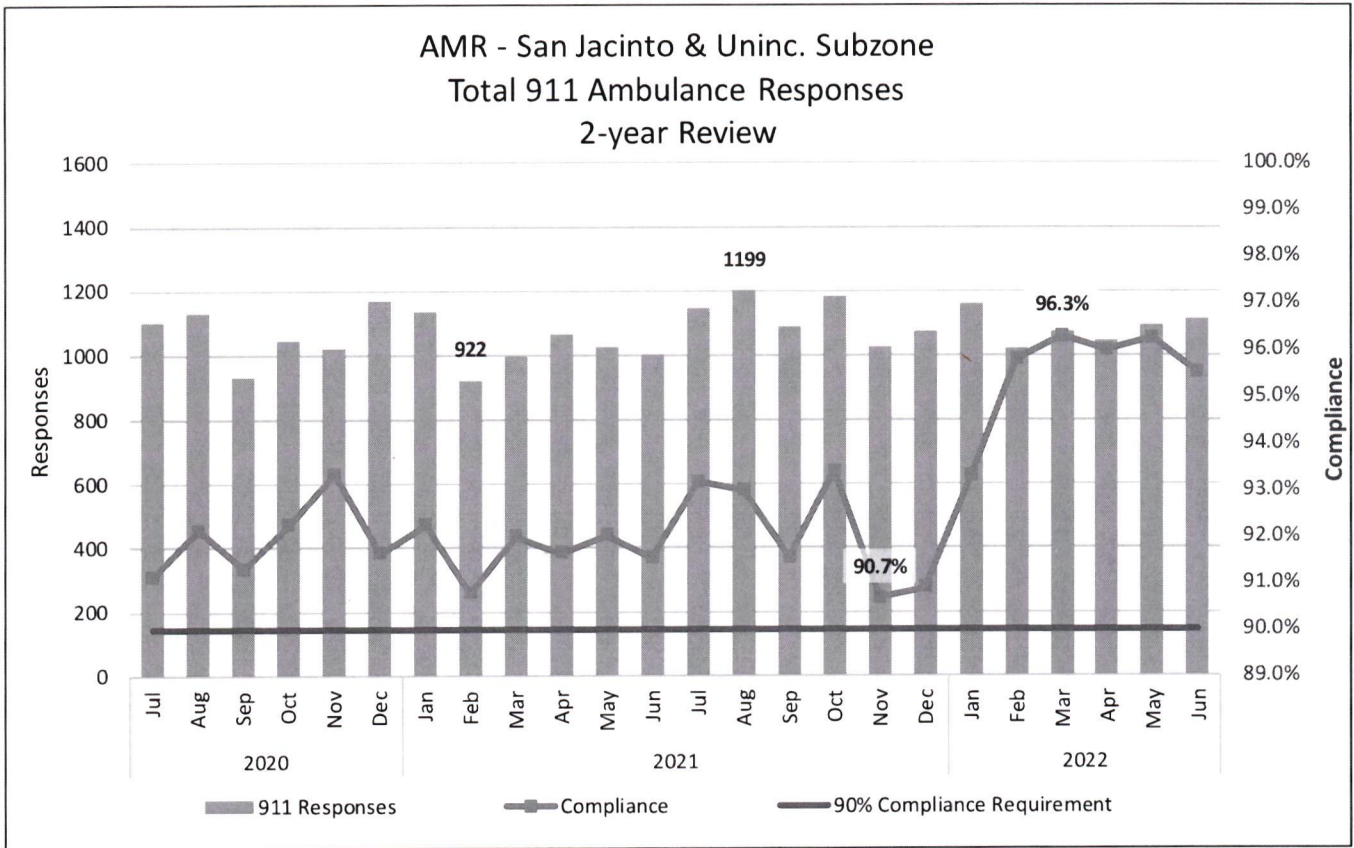
The San Jacinto Response Time Zone includes two subzones: Hemet city and the San Jacinto and Unincorporated Area subzone. The Hemet Subzone contains the majority of the 911 ambulance response volume for the zone. Response volume has been leveling off over the past few years, and this area experiences many Ambulance Patient Offload Delays (APODs).



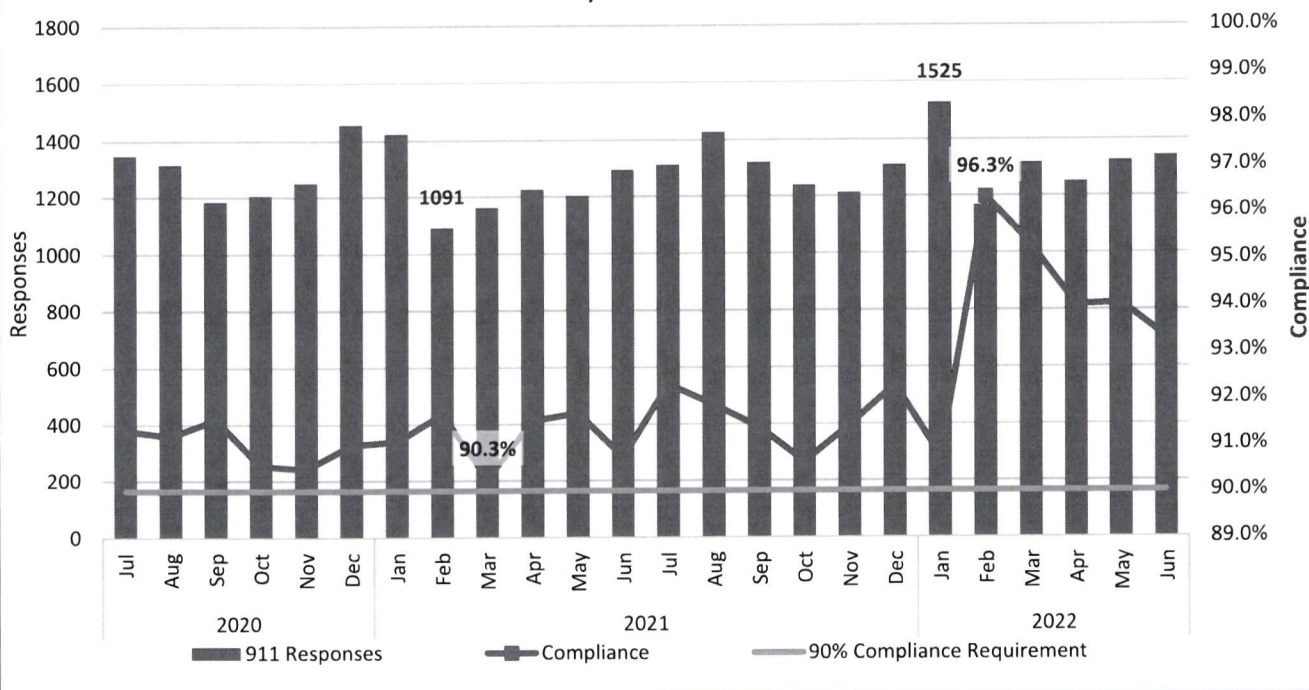
San Jacinto Zone: Subzone Response and Compliance Data



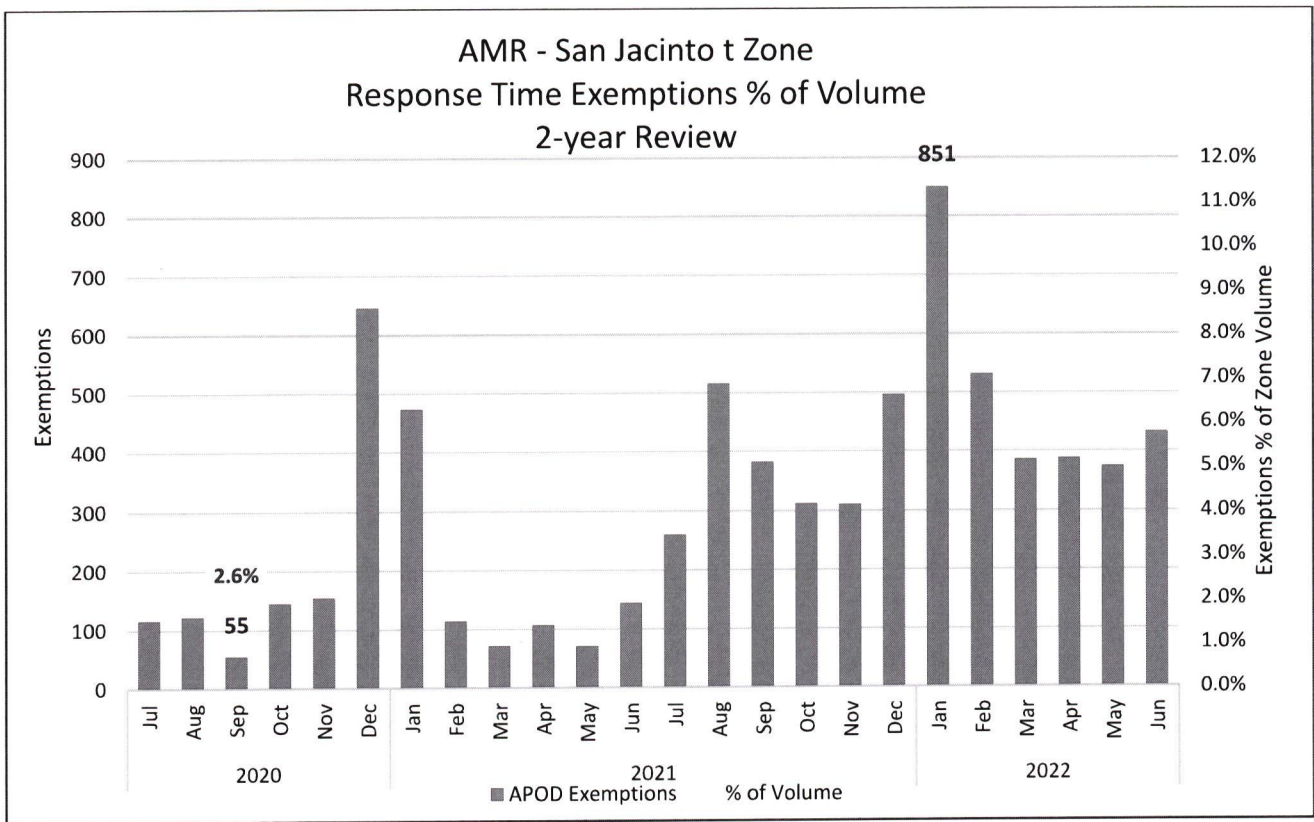
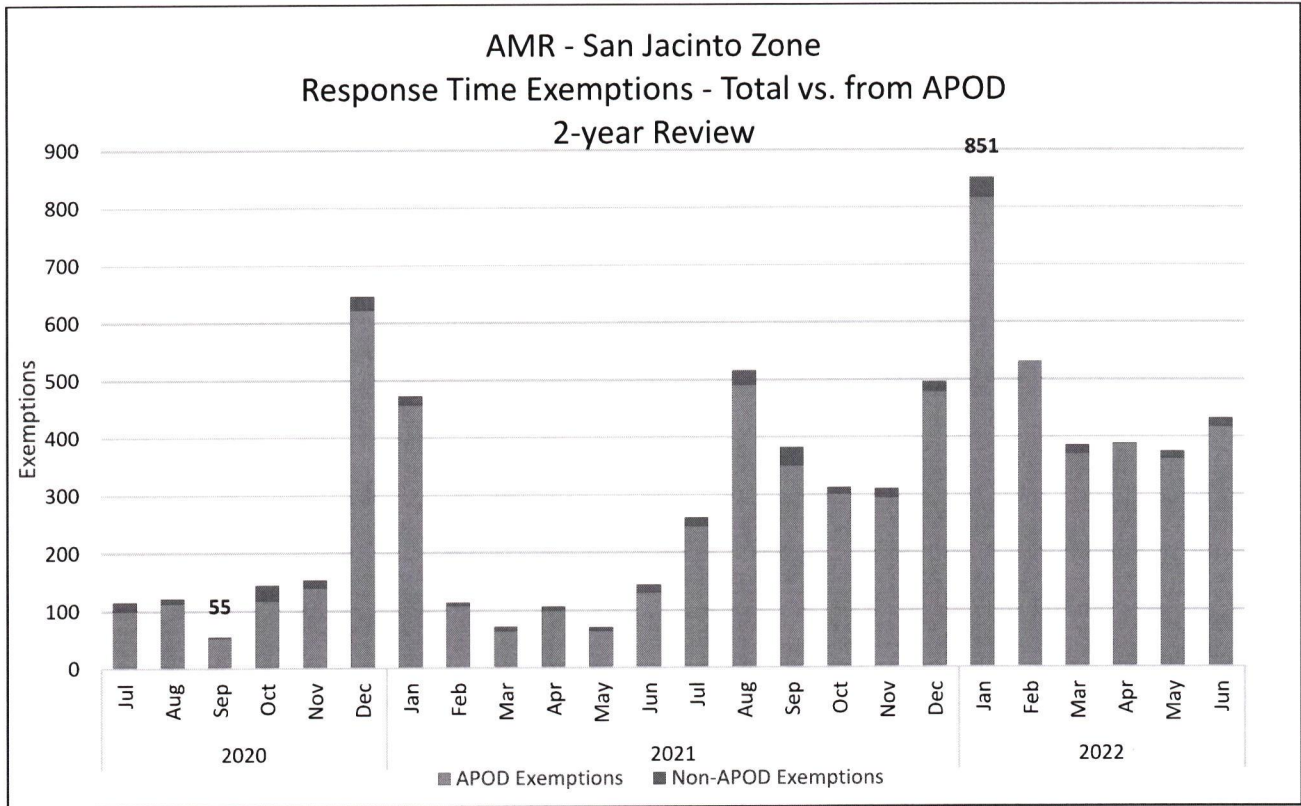
San Jacinto Zone: Subzone Response and Compliance Data (cont.)



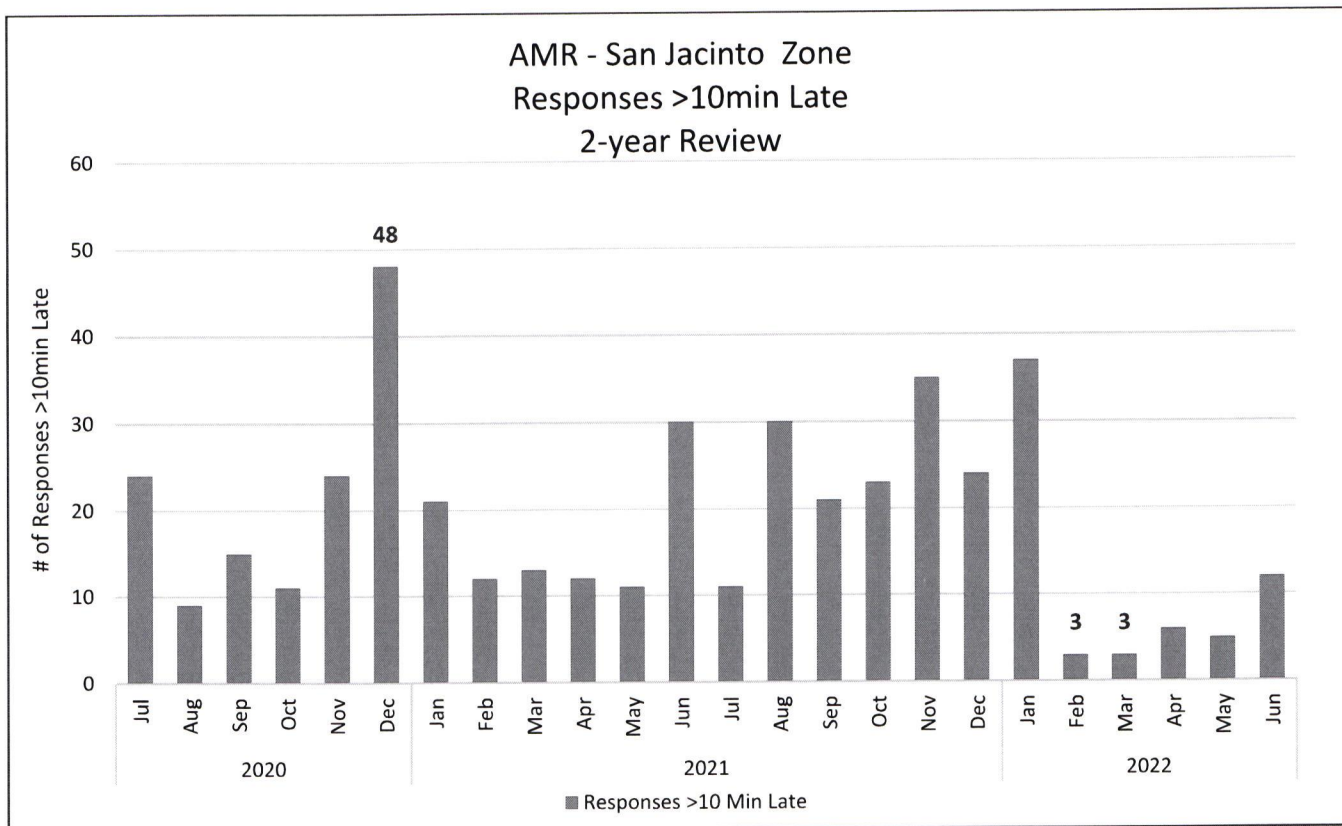
AMR - Hemet Subzone Total 911 Ambulance Responses 2-year Review



San Jacinto Zone: Exemptions



San Jacinto Zone: Responses > 10 Minutes Late



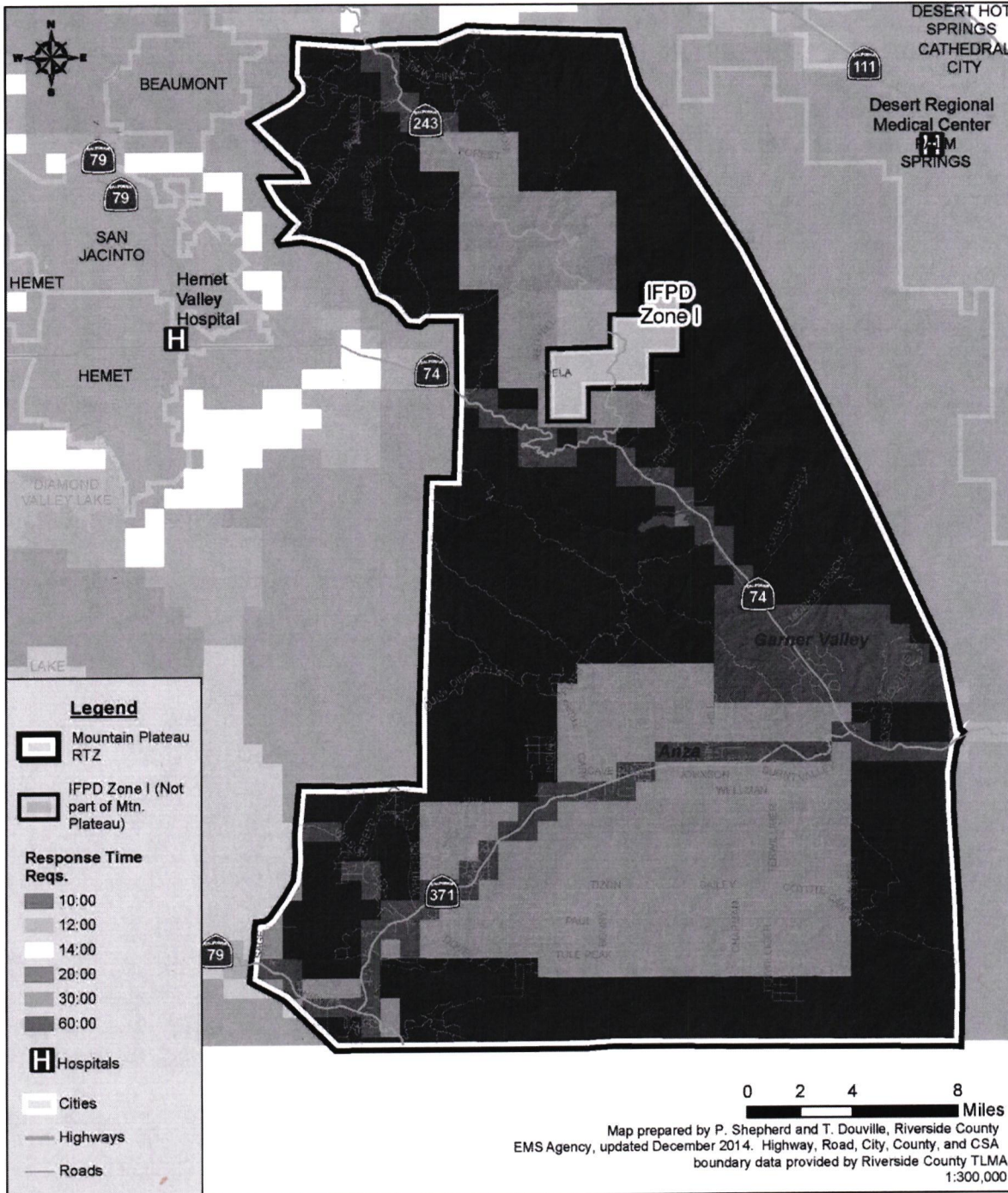
MOUNTAIN PLATEAU ZONE

The Mountain Plateau Response Time Zone consists of several rural communities and has no hospitals within the zone. The AMR ambulance response volume in the Mountain Zone averages 114 9-1-1 ambulance responses per month (2018 data) with an average of five late calls per month.

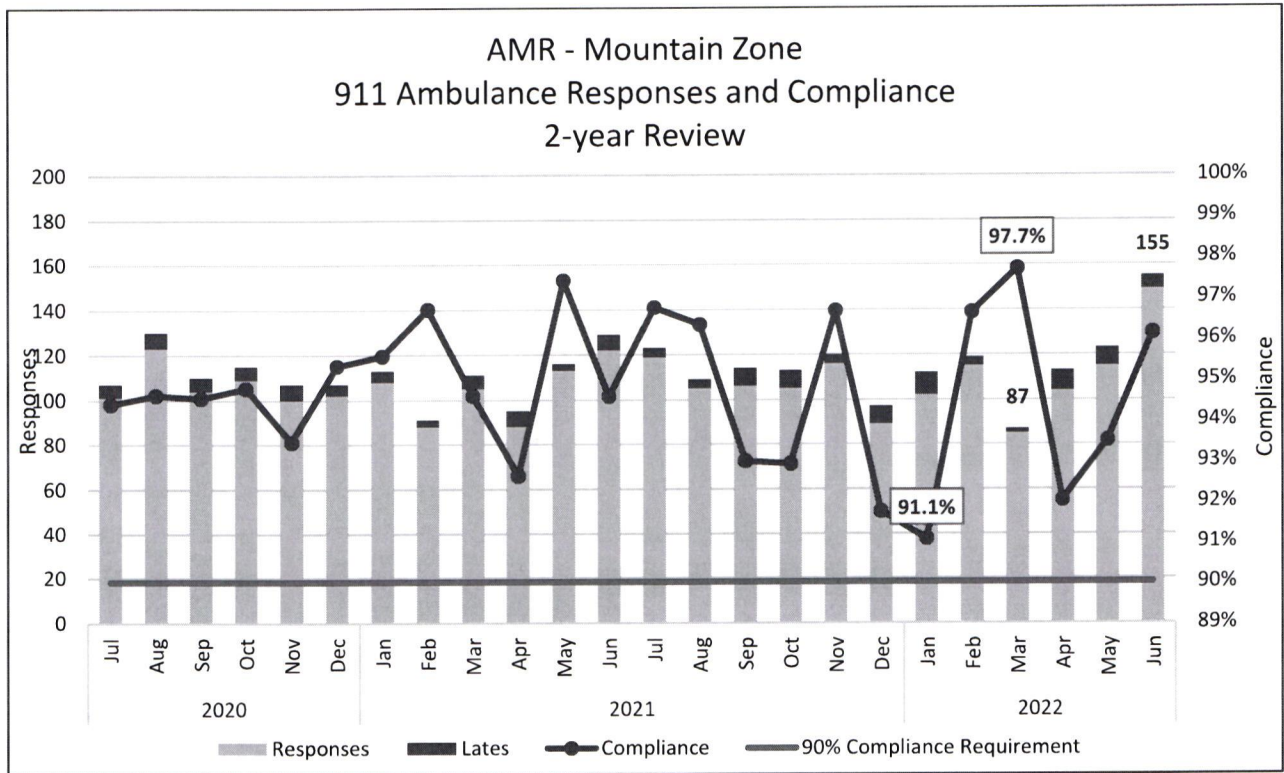
RIVERSIDE COUNTY EMERGENCY MEDICAL SERVICES SYSTEM GROUND ALS EMERGENCY AMBULANCE RESPONSE TIME ZONES



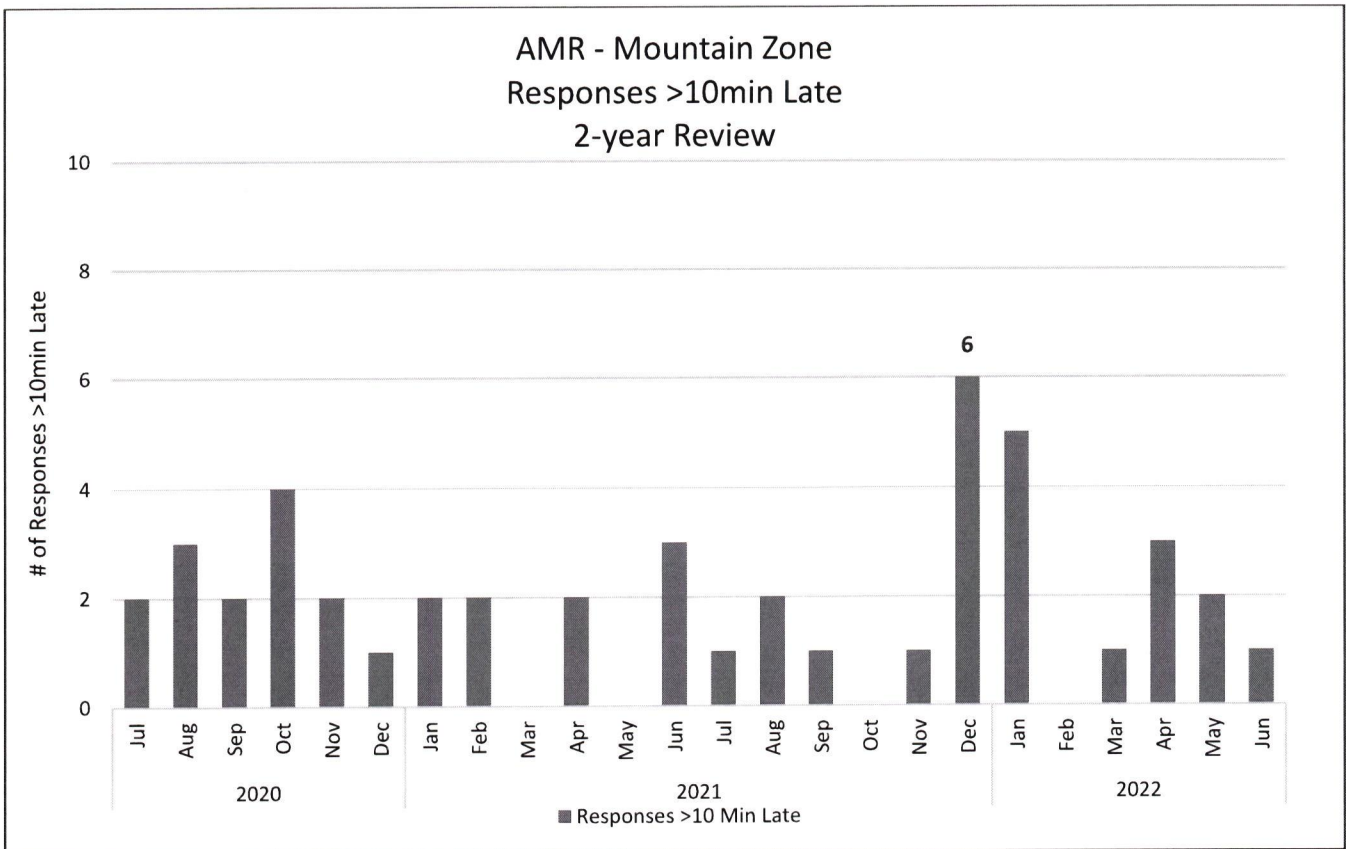
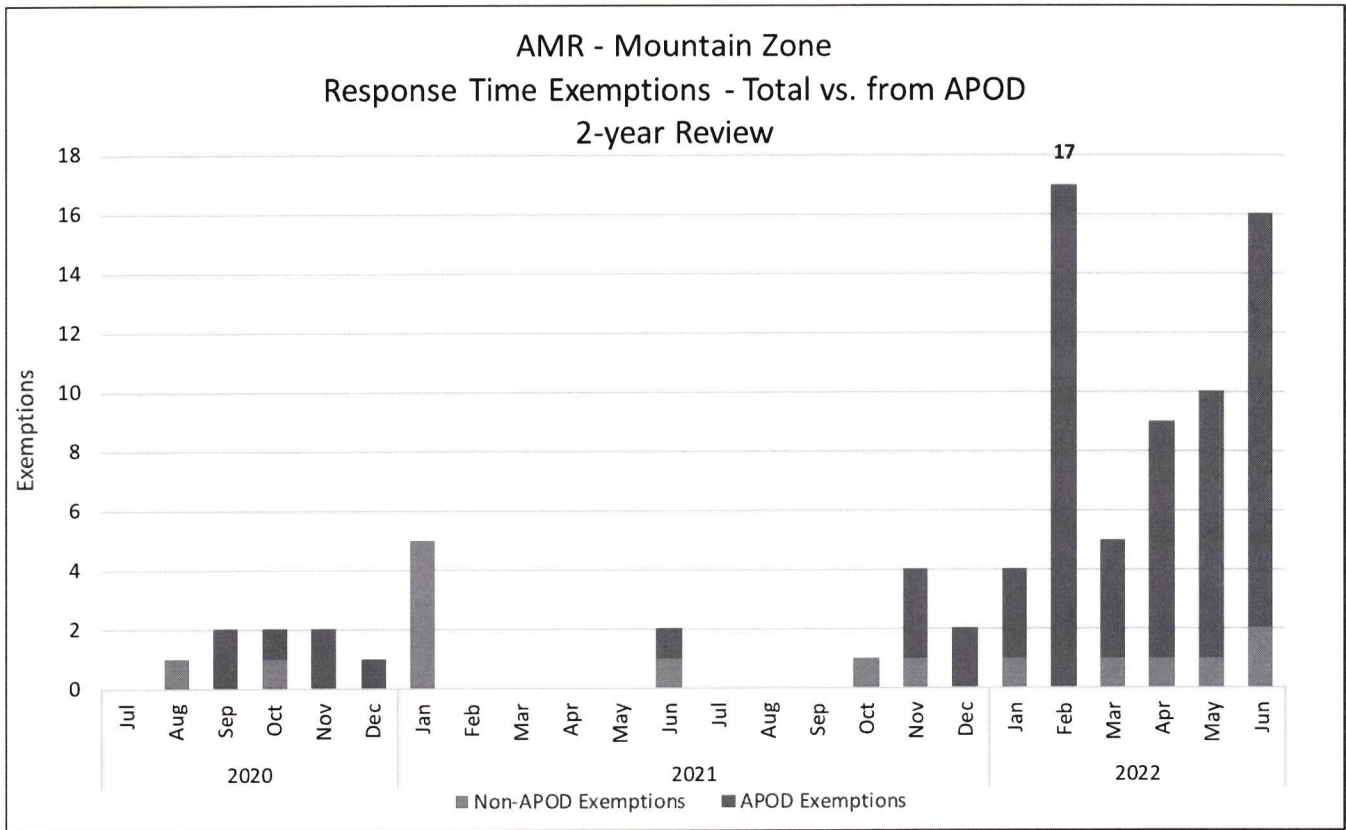
MOUNTAIN PLATEAU



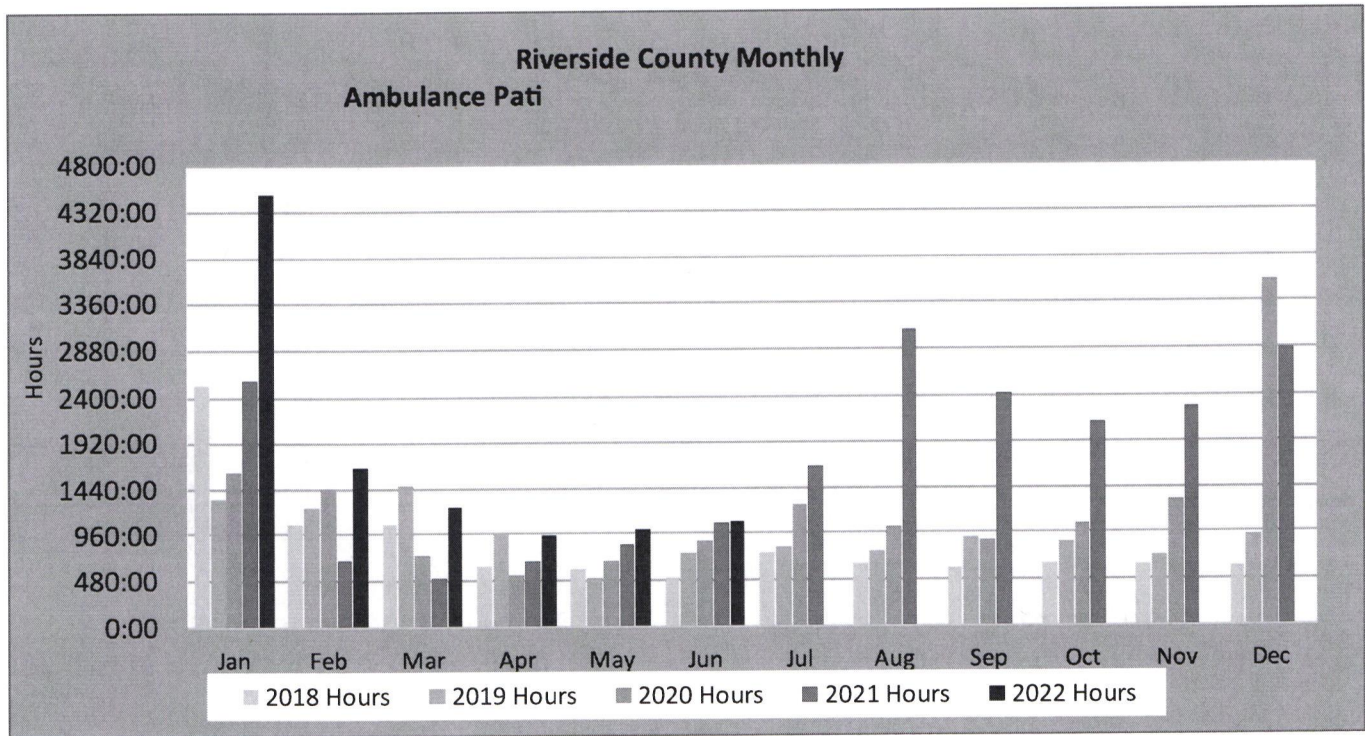
Mountain Plateau Zone: Response and Compliance Data



Mountain Plateau Zone: Exemptions and >10 Minutes Late



AMBULANCE PATIENT OFFLOAD TIME



June 2022						
	ALS Transports	APOT	APOD Hours	APODs	APOD Compliance	APOT - 1
Corona Regional Med Ctr	757	399:32:53	131:29:05	241	68.2%	1:04:39
Desert Regional Med Ctr	1,365	270:14:53	11:35:02	32	97.7%	0:20:17
Eisenhower Health	1,268	238:14:33	1:50:22	18	98.6%	0:18:06
Hemet Valley Hospital	1,276	783:27:52	260:48:25	549	57.0%	1:07:57
Inland Valley Med Ctr	892	398:27:46	107:00:47	241	73.0%	0:53:41
JFK Hospital	679	97:02:03	1:13:40	7	99.0%	0:16:26
Kaiser Hospital Moreno Valley	346	133:08:03	25:24:45	74	78.6%	0:44:44
Kaiser Hospital Riverside	521	292:33:21	103:01:09	190	63.5%	1:12:37
Loma Linda Univ Med Ctr Mur	752	276:14:44	32:04:52	121	83.9%	0:36:51
Menifee Med Ctr	264	105:01:39	13:41:10	64	75.8%	0:44:06
Palo Verde Hospital	151	16:23:48	0:00:00	0	100.0%	0:11:55
Parkview Community Hospital	659	207:11:00	15:44:17	73	88.9%	0:30:44
Rancho Springs Med Ctr	499	215:23:25	53:58:57	119	76.2%	0:48:34
Riverside Community Hospital	1,537	823:44:15	247:18:28	584	62.0%	1:02:55
Riverside University Health System	1,477	441:25:33	14:02:19	108	92.7%	0:28:58
San Geronio Mem Hospital	651	265:53:10	46:58:45	136	79.1%	0:45:41
Temecula Valley Hospital	549	194:36:49	23:15:18	99	82.0%	0:39:43
Grand Total	13,643	5158:35:47	1089:27:21	2656	80.5%	0:43:38

	Monthly Average over last 12 Months					
	Avg	Avg APOD		Min of	Max of	
	Transports	Avg APOT	Hours	APODs	APODs	
Corona Regional Med Ctr	757	408:42:59	135:46:24	258	197	365
Desert Regional Med Ctr	1,278	365:48:27	73:41:04	148	32	269
Eisenhower Health	1,315	279:12:43	21:20:24	57	16	98
Hemet Valley Hospital	1,145	794:39:39	325:21:22	550	374	638
Inland Valley Med Ctr	900	473:00:40	166:52:07	309	202	453
JFK Hospital	674	94:11:11	2:14:43	9	3	12
Kaiser Hospital Moreno Valley	336	188:05:52	69:14:19	121	74	156
Kaiser Hospital Riverside	535	339:30:26	139:48:28	223	185	272
Loma Linda Univ Med Ctr Mur	722	359:42:04	111:10:10	207	115	321
Menifee Med Ctr	284	184:20:15	75:34:04	114	51	183
Palo Verde Hospital	154	22:35:55	1:41:59	6	0	11
Parkview Community Hospital	640	282:24:25	66:20:48	158	73	276
Rancho Springs Med Ctr	511	256:45:37	86:57:32	146	88	219
Riverside Community Hospital	1,482	957:00:07	373:29:32	706	582	854
Riverside University Health System	1,506	495:08:40	31:48:40	201	90	387
San Gorgonio Mem Hospital	594	271:12:29	70:12:38	149	49	278
Temecula Valley Hospital	575	249:12:46	57:42:55	160	74	246

	Average APOD and Compliance by Qtr Comparison								
	2021			2022					
	Qtr4	Qtr1		Qtr1			Qtr2		
	Compliance	APODs	APOD Hours	Compliance	APODs	APOD Hours	Compliance	APODs	APOD Hours
Corona Regional Med Ctr	66%	267	142:37:49	62%	265	156:18:48	68%	233	114:04:54
Desert Regional Med Ctr	84%	203	109:50:29	87%	148	68:03:19	95%	62	20:44:25
Eisenhower Health	94%	85	34:11:37	95%	70	31:58:46	98%	23	4:23:49
Hemet Valley Hospital	43%	627	425:04:16	49%	506	315:36:28	65%	448	175:29:43
Inland Valley Med Ctr	63%	345	203:17:01	68%	265	122:37:11	73%	242	106:44:37
JFK Hospital	98%	11	3:33:08	99%	10	2:33:48	99%	5	0:58:50
Kaiser Hospital Riverside	55%	250	163:55:42	62%	195	114:50:57	63%	196	114:19:55
Loma Linda Univ Med Ctr Mur	66%	244	135:17:23	79%	155	51:08:58	82%	134	34:49:27
Menifee Med Ctr	50%	157	116:30:38	63%	91	68:09:58	75%	61	16:47:38
Palo Verde Hospital	95%	9	3:12:14	95%	6	1:51:43	98%	3	0:22:26
Parkview Community Hospital	66%	234	128:30:05	76%	147	50:16:24	86%	82	17:15:34
Rancho Springs Med Ctr	67%	183	123:26:41	74%	117	51:56:29	77%	109	58:37:16
Riverside Community Hospital	44%	816	511:16:09	56%	598	316:26:29	61%	612	243:06:50
Riverside University Health System	83%	259	45:38:03	91%	129	15:53:40	93%	109	13:19:23
San Gorgonio Mem Hospital	67%	202	110:48:17	81%	102	38:03:13	84%	89	26:46:36
Temecula Valley Hospital	66%	196	81:34:54	68%	174	68:02:28	82%	96	22:08:52
	69%	255	146:10:17	76%	186	92:06:47	81%	156	60:37:31

	Average Transports and APODs at ETS: Quarter Comparison								
	2021			2022					
	Qtr4	Qtr1		Qtr1			Qtr2		
	Compliance	APODs	APOD Hours	Compliance	APODs	APOD Hours	Compliance	APODs	APOD Hours
Emergency Treatment Services	23%	210	94:30:47	22%	219	133:46:59	34%	196	75:13:54

2021-2022 Annual Performance Report and recommendation for granting a one (1) year ‘earned extension’ to the term of the agreement (#15-097) with American Medical Response (AMR).

Date: 1-12-2023

Background

The Board of Supervisors approved the County 9-1-1 Advanced Life Support (ALS) emergency ambulance agreement with American Medical Response (AMR) on January 13, 2015 (item 3-8). The seventh-year performance period of the agreement commenced on July 1, 2021 and finished on June 30, 2022. According to the terms of the agreement, AMR may submit a written request for a one (1) year ‘earned extension’ each year following the first full year of the agreement. To qualify for an earned extension, AMR must submit the annual performance report to the Riverside County EMS Agency (REMSA) and request the one (1) year earned extension by September 1, 2021. REMSA received AMR’s request accompanied by their annual performance report on September 1, 2021.

The annual performance report must include (1) evidence of compliance with the agreement provisions, (2) achievement of response time performance of at least 91% in all response time zones for at least nine months, (3) evidence of completed system enhancements for the finished year, and (4) a written agreement with REMSA for planned EMS system enhancements for the next performance period. The request may also include a rate increase request to cover the cost of system enhancements for the current year that exceeds \$250,000.

DETERMINATION OF CONTRACTOR (AMR) ELIGIBILITY

REMSA has reviewed AMR’s annual report submission and all the contractor requirements, as stipulated in the agreement, for eligibility to receive a one-year earned annual renewal. Additionally, REMSA monitors AMR’s compliance monthly and reports response time performance semi-annually to the EMS Administrative Zone Groups. REMSA utilized the following to determine that AMR has not met the terms of the agreement to grant a one-year renewal:

- 2021/2022 AMR Annual Report
 - Exhibit A: **Completed** System Enhancements: 2021/2022 - (Page 9)
 - Exhibit B: **Planned** System Enhancements: 2021/2022 - (Page 10)
 - Attachment 1: 2021/2022 AMR Compliance Review Matrix
 - Attachment 2: 2021/2022 AMR Annual Response Time Report

The AMR Annual Report, Compliance Review Matrix, and Response Time Report supply the information collected by REMSA to determine AMR’s compliance with the agreement provisions. The performance period reviewed by REMSA is the seventh year of the agreement, which ran from July 1, 2021, through June 30, 2022. The following summarizes key performance areas of the agreement during that performance period.

RESPONSES, TRANSPORTS, AND COMPLIANCE

AMR responded to 223,568 Emergency Medical Service (EMS) 9-1-1 calls during this performance period and transported 156,904 patients to hospitals (72% transport percentage). Compared to the previous performance period, this was a 9.1% increase in 9-1-1 response volume and a 14.2% increase in patient transport. Ambulance response and transport volume were elevated throughout this performance period.

Period	Total Responses	Transports	Transports with APOD	Transport (%)
2021	111,608	79,273	24,226	70%
Quarter 1	56,658	40,099	12,049	70%
Quarter 2	54,950	39,174	12,177	69%
2022	111,960	77,631	19,548	75%
Quarter 3	55,053	38,222	11,419	70%
Quarter 4	56,907	39,409	8,129	79%
Grand Total	223,568	156,904	43,774	72%

Refer to attached AMR Annual Compliance document.

OPERATIONS AND EMERGENCY MEDICAL DISPATCH

3.1.3 Advanced Life Support (ALS) Mandate - Contractor shall place an ALS ambulance on scene for every request for emergency medical services, unless otherwise authorized by REMSA through an approved Emergency Medical Dispatch (EMD) and resource response program that dictates level and priority of ambulance response. The ALS mandate may be suspended by REMSA either directly or by policy/protocol during a Multiple Casualty Incident (MCI) response.

AMR began experiencing the inability to respond to certain ALS mandated calls during the Flu/COVID surge in December 2021 of the performance period. REMSA authorized a BLS response model to low acuity Omega and Alpha EMD calls only.

Emergency Medical Dispatch covers approximately 96% of the County including all Riverside County Fire resources and dispatched agencies including but not limited to: Calimesa Fire, Canyon Lake Fire, Pechanga Fire, Soboba Fire, Morongo Fire. The municipal Fire departments have approved EMD programs including Corona Fire, Riverside City Fire, and Murrieta Fire and Rescue. This gives AMR wide discretion to execute that agreement to strategically dispatch BLS resources to low acuity calls across the County.

During the sample research time during the performance period. AMR fails to effectively use the program and BLS resources respond above the tier of Omega, Alpha EMD calls. This is not in compliance with section 3.1.3 ALS mandate of the contract. AMR responded BLS resources 3,177 during the sample period. BLS responded to Omega and Alpha EMD calls 1,301 or 40.09% to the approved REMSA program of tiered response. 1,876 responses were deemed non-compliant of the ALS Mandate or 59.91%. Month over month non-compliance rate of 57-61% of the total BLS responses were non complaint with section 3.1.3 of the contract.

Month	Feb	March	April	May	June
Total Responses	16917	18282	17652	18647	18542
Total BLS Responses	721	664	532	639	621
EMD approved (Omega, Alpha)	277	285	227	259	253
EMD-Beta, Charlie, Delta, Echo	274	254	192	233	245
EMD-NA	170	125	113	147	123
Total Non-Compliant BLS Responses to Mandate	444	379	305	380	368
Percent of Non-Compliant BLS Responses to Mandate	61%	57%	57%	59%	59%

CLINICAL DATA COLLECTION AND REPORT

During this performance period, AMR submitted 237,307 records compared to 212,783 of the last performance periods. This marks an 11% increase from the previous year in ePCRs to the Riverside County EMS Information System (REMSIS) for review and analysis.

Performance Period		AMR - Desert Cities	AMR - Hemet	AMR - Riverside
Quarter 1	Jul-21	3486	3841	12908
	Aug-21	3724	4201	13405
	Sep-21	3353	3860	12286
Quarter 2	Oct-21	3406	3910	12300
	Nov-21	3454	3587	12386
	Dec-21	3539	3808	12581
Sub Total Quarter 1 and 2		20962	23207	75866
Quarter 3	Jan-22	3700	4062	12146
	Feb-22	3106	3597	11182
	Mar-22	3419	4271	12100
Quarter 4	Apr-22	3472	4031	11730
	May-22	3479	4409	12450
	Jun-22	3344	4454	12320
Sub Total Quarter 3 and 4		20520	24824	71928
GRAND TOTAL		41,482	48,031	147,794

The AMR records collected by REMSA were submitted to the California EMS Authority (EMSA) for inclusion in the California EMS Information System (CEMSIS) to improve Statewide decision-making related to public health concerns such as COVID-19, Ebola, MX, influenza like illness, and respiratory syncytial virus. REMSA also included AMR's data in the California Core Measures report for 2021, subsequently submitted to EMSA on April 25, 2022.

WORKFORCE SATISFACTION AND TURNOVER

AMR's turnover survey results were reviewed and verified by REMSA staff. AMR employee turnover by a quarter during the performance period was July-Sept 10.1%, Oct-Dec 7.3%, Jan-Mar 8.4%, and Apr-Jun 8.0%. The top 3

primary reasons for separation, according to survey results provided to REMSA, were: Job with the Fire Department 19%, career advancement 14%, and seeking other employment 16%.

AMR Employee Turnover	2018-19	2019-20	2020-21	2021-22
Q1	5.8%	9.8%	7.31%	10.1%
Q2	3.9%	5.5%	6.39%	7.3%
Q3	5.1%	6.3%	7.27%	8.4%
Q4	3.9%	5.1%	9.69%	8.0%

Turnover has increased significantly compared to the pre-covid performance periods, and AMR continues to escalate recruiting and retention strategies. AMR continued to offer paramedic scholarships, sign-on bonuses, paramedic upgrade bonuses, and in certain locations relocation bonuses to attract candidates. During this performance period “career advancement” was the number one cause of turnover. Typically, “Job with the fire department” is the primary cause for turnover.

EMPLOYEE INJURIES AND EXPOSURES

During the performance period July 1, 2021 – June 30, 2022

The most common cause of employee injury or exposure was:

COVID related quarantine: 423 instances that resulted in lost workdays

Sprains/Strains: 25 instances that resulted in lost workdays

CUSTOMER SERVICE AND PATIENT SATISFACTION

AMR continues to utilize a patient satisfaction survey that is conducted by a third-party vendor, “EMS SURVEY TEAM.” A percentage of patients are randomly selected and surveyed each month. The data is analyzed the vendor generates the reports monthly and or quarterly. The reports include customer satisfaction scoring relating to dispatch, ambulance, personnel, and office performance. The report also includes AMR’s overall mean score and performance compared to similar companies.

Performance Quarters	Q1	Q2	Q3	Q4	Benchmark
Cleanliness of the Ambulance	95.00%	94.75%	94.94%	95.97%	95.34%
Skill of the driving the ambulance	94.92%	93.83%	95.35%	95.34%	94.60%
Care shown by the medics who arrived with the ambulance	94.13%	95.95%	94.12%	91.59%	95.11%
Skill of the medics	93.66%	91.79%	95.19%	92.31%	95.17%
Degree to which the medics took your problem seriously	93.40%	94.86%	94.05%	91.46%	95.00%
Willingness of billing to address your needs	83.36%	84.73%	89.74%	90.00%	89.30%
Professionalism of billing staff	83.39%	83.22%	89.29%	89.39%	89.32%
Extent to which the services received were worth the fees charged	84.38%	85.17%	88.76%	88.19%	89.44%
Comfort of the ride	86.34%	89.24%	91.76%	90.73%	88.50%
Extent to which medics	88.20%	92.42%	89.84%	89.80%	93.13%

included you in the treatment decisions					
Overall Score	91.49%	92.53%	92.91%	92.39%	

Contractor shall include qualitative and quantitative evaluation of customer feedback for services provided under the terms of this Agreement. Findings and metrics shall be included in the annual performance report to REMSA as stated in Exhibit 10, section 10.3, and shall document and incorporate feedback from, but not limited to, the following customers:

- 8.1.1 Fire Department First Responder Agencies
- 8.1.2 Base Hospital Paramedic Liaison Nurses (PLN) and ED Medical Directors
- 8.1.3 Non-Base Prehospital Receiving Hospitals
- 8.1.4 City Managers
- 8.1.5 Sub-Acute Care Facilities (e.g., clinics, dialysis centers)
- 8.1.6 Skilled Nursing Facilities and Assisted Living Facilities

AMR conducted two surveys facilitated by survey monkey to the 8.1 intended audience with 18 respondents from hospitals giving positive marks in relation to customer satisfaction. 2022 survey had 32 respondents: 27 from hospitals, 3 from fire agencies, 1 from City government, and 1 police/sheriff agency. Responses were positive.

VEHICLE PERFORMANCE AND SAFETY

AMR Riverside County drove 7,942,849 miles in the performance period July 1, 2021 – June 30, 2022. The fleet experienced 13 at fault vehicle contacts during the period resulting in 610,088 miles DRIVEN per at fault vehicle contact. This is a 33.03% increase in miles driven per contact compared to the previous year. AMR has had their fleet equipped with DriveCam for several years, which is a vehicle monitoring system to help us in identifying risky behavior and through coaching and counseling, changed driving habits that have been shown to reduce incidents.

HIGH USERS OF 9-1-1 SERVICES

REMSA has developed at the request of AMR. A program that identifies individuals who are repeated heavy users of 9-1-1 services. This effort identifies individuals who may benefit from alternative services or education that would lessen the use of the 9-1-1 system due to chronic medical conditions. Additionally, it identifies opportunities for improving EMS system efficiency and reducing costs.

The process is through electronic patient care records (ePCR) demographics fields. Variation in patient names were accounted for using the Soundex module that converts patient names into numerical representation and compares for similarity. Examples, Stephanie or Stephany or Stephani will be matched to the same patient with matching last name and DOB.

Although there is now a method of identification for the high frequency users of the 911 system. AMR has not proposed or maintains a program in reducing the utilization of 911 resources.

De-identified patient name	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total Responses
N-9	9	18	14	15	5	8	8	13	13	15	21	12	151
N-203			13	25	30	9	13	11	16			9	126
N-173		5	22	25	10			5		5	23	14	113

	Total Responses	192,621
	Total Patients	116,987
Total Patients with minimum of 5 responses per month		231
Total patients with 5 responses per month for 10+ months in 2021		1
Total Patients with 5 responses per month for 7-9 months in 2021		5
Total Patients with 5 responses per month for 4-6 months in 2021		11
Total Patients with 5 responses per month for 2-3 months in 2021		49
Total Patients with 5 responses per month for 1 month in 2021		165

SERVICES FOR MENTAL HEALTH PATIENTS

AMR Riverside 5150 transports by Zone for the performance period July 1, 2021 – June 30, 2022.

EMS Zone	Transports	Percentage of Total
Northwest Zone	2292	31.46%
Central Zone	1750	19.53%
Southwest Zone	892	09.95%
San Jacinto/Hemet Zone	848	09.46%
Pass Zone	293	03.27%
Mountain Plateau Zone	0	00.00%
Desert Zone	2819	31.46%
Palo Verde Zone	68	00.76%
Total Transports	8962	100%

AMR provides ambulance transportation for mental health patients placed on Welfare and Institutions Code (WIC) 5150 (hold for gravely disabled individuals). These patients are transported from the field at the request of law enforcement or between facilities at the request of the Riverside University Health System (RUHS) Behavioral Health Department.

5150 transports were down by 1027 transports over last performance period. AMR through system enhancement is working with Riverside University Behavioral Health to develop a crisis response unit to aid officer is in no writing 5150's and transporting patients to voluntary treatment centers instead of General Acute Care Hospitals.

20.65% of Mental Health transports were from law enforcement/fire agency requests, the majority were from healthcare facilities.

COMMUNITY EDUCATION AND INVOLVEMENT

During this performance period, AMR provided 1464 hours of community education and support across Riverside County.

Public Education	Hours	Tactical Support	Count
NW Zone:	299	Emergency Activations	86
SW Zone:	143.5	Standby/Training Missions	77

San Jacinto/Hemet Zone:	78.5	Preplanned Missions	42
Pass Zone:	46		
Mountain Plateau Zone:	2.5		
Desert Zone:	24		
Central Zone:	19		
Palo Verde Zone:	7		
Riverside County:	619.5	Total TEMS Hours	844.5
Subtotal	619.5	Subtotal	844.5

GRAND TOTAL **1464**

FINANCIAL PERFORMANCE

AMR's fiscal year runs concurrently with the calendar year, making financial reporting by AMR's fiscal year misaligned with the agreement performance period. However, throughout the performance period, REMSA receives preliminary quarterly financial statements. For AMR's fiscal year 2022, AMR provided an audited annual financial statement to REMSA for review. The financial statement reported net revenue of \$113,219,232 and operating expenses of \$97,433,807. Earnings before income tax and interest were \$15,785,425; taxes were \$4,422,650; and total profit was \$11,362,775. Total profit as a percentage of net revenue was 10.04%.

2016-2021	2016	2017	2018	2019	2020	2021
Net Revenue	124,368,557	130,288,845	136,181,476	109,302,915	102,089,706	113,219,232
Operations Expenses	116,471,640	120,902,826	133,346,722	91,437,449	92,893,864	97,433,807
EBITDA	7,896,917	9,386,019	2,834,754	17,865,466	9,195,842	15,785,425
Taxes	4,662,320	3,841,039	799,974	5,008,554	2,575,640	4,422,650
Profit	3,234,597	5,544,980	2,034,780	12,856,912	6,620,202	11,362,775
Revenue %	2.50%	4.30%	1.50%	11.80%	6.50%	10.04%

SERVICE RATES

Per Exhibit 13 of the agreement, AMR has requested a rate increases as the Ambulance rate of 6.38% for the current performance period from the previous year. The rates below as follows:

	2020/2021 Rates	2021/2022
<i>ALS and BLS Rate</i>	2,028.71	2,158.14
<i>Mileage</i>	48.33	52.48
<i>Oxygen</i>	211.00	224.46
<i>Night Charge</i>	230.72	245.44
<i>Dry Run with Patient Care</i>	315.32	335.43

RATE INCREASE FOR PLANNED SYSTEM ENHANCEMENTS

The terms of the current agreement require that AMR provide the first \$250,000 in annual system enhancements at their cost and may request a rate increase to cover the balance of the cost of the agreed-upon system enhancements. REMSA negotiated the PLANNED system enhancements to be completed by AMR during the 2021-2022 performance period. These planned enhancements totaled \$290,000. AMR has requested a 6.38% increase based on the area consumer price index of a 1.5% as determined by the US Bureau of Labor and Statistics and published on their website.

SUMMATION

REMSA has concluded with the annual performance report from American Medical Response (AMR). The following sections included contract compliance deficiencies in several areas. These impact the possibility for AMR to qualify for the earned annual renewal for the July 21-June 22 performance year. The specified areas that were out of compliance with contract requirements are submission of monthly compliance reports within 15 days of the end of each month, response time compliance below both enhanced and minimum required criteria and sending BLS ambulances to ALS calls outside what has been approved by REMSA through an approved Emergency Medical Dispatch (EMD) program. Additionally, the annual report was submitted by the required date but did not include final response time compliance reports for Feb22 through June 22. It is acknowledged that the ongoing impacts of COVID, particularly system and statewide paramedic staffing shortages, played a signification role in some of these compliance issues.

The current Ambulance 9-1-1 Advance Life Support (ALS) emergency ambulance service contract is only extended until June 30, 2026.

EXHIBIT A:
COMPLETED SYSTEM ENHANCEMENTS (2021/2022)

COMPLETED SYSTEM ENHANCEMENTS (2021/2022)	Cost
Completed - Ambulance Fleet Upgrade - Upgrade contractor's fleet to 100% Type III vehicles.	\$1,000,000
<u>During the 2021/22 performance period, AMR has completed the following technology upgrades:</u>	
<ul style="list-style-type: none"> • Pager to Cellphone upgrades 	\$14,000
<ul style="list-style-type: none"> • ALV Modem upgrades 	\$14,000
<ul style="list-style-type: none"> • Mobile Data Terminal upgrades 	\$15,000
<ul style="list-style-type: none"> • TriTech CAD upgrade 	\$10,000
<ul style="list-style-type: none"> • Cisco upgrades 	\$16,000
<ul style="list-style-type: none"> • ImageTrend ePCR device upgrades 	\$9,000
<ul style="list-style-type: none"> • Cardiac Monitors upgrades 	\$50,000
AMR Mobile Training Unit (MTU) – Ongoing: AMR continues to operate the MTU which is equipped with a high-fidelity manikin to simulate more realistic training scenarios. The MTU is available to EMS system partners and AMR personnel. The unit also contains cameras and monitors to allow students to watch interactions outside of the vehicle to enhance the student experience. Further, it is stocked with two CPR manikins designed to test and provide feedback to healthcare professionals on effective CPR.	\$15,000
Citizen CPR Training Unit (CTU) – Ongoing: AMR has two (2) dedicated CTUs, fully stocked with all supplies necessary to conduct compression-only training for any group or organization. AMR has hired a full-time CPR coordinator to do community outreach and schedule training classes, including a dedicated CPR training phoneline for the community to schedule classes.	\$110,000
Advanced Vehicle Location (AVL) Technology Partnership – Ongoing: The Mountain Zone closest unit response program/policy: AMR provides ambulance/vehicle tracking services to Idyllwild Fire Protection District's ambulance including AVL equipment to improve 9-1-1 ambulance service delivery within the entire Mountain Zone. AMR monitors the location and movement of ambulances in the Mountain Zone to facilitate the closest ambulance response. Currently, IFPD has modems installed in its four primary ambulances. AMR estimates a revenue reduction of \$178,000 related to patient transports that IFPD will now provide.	\$181,600
ET3 Telemedicine and Alternate Destination – NEW: AMR was selected by the Centers for Medicare/Medical Services to participate in their ET3 pilot project. This program allows for the transport of patients to alternative destinations and provides telemedicine to appropriate patients who are low acuity but have accessed the 911 system. The project is designed to utilize healthcare destinations and assessment modalities that will increase efficiencies and reduce overall healthcare costs while enhancing the patient experience.	\$150,000
Electric Vehicles - AMR is committed to working on a transition away from our dependence on non-renewable resources to clean, sustainable energy sources. – AMR has purchased one of the nation's first all-electric ambulances. AMR has also purchased an all-electric Supervisor (Ford Mustang Mach-E) vehicle.	\$255,000
Total	\$1,839,600

EXHIBIT B:
PLANNED SYSTEM ENHANCEMENTS (2021/2022)

PLANNED SYSTEM ENHANCEMENTS (2021/2022)	Cost
Community Assessment and Transport Team (CATT) Pilot Program – AMR, in cooperation with Riverside County Behavioral Health, reached a tentative agreement for a 5150-response unit. This unit will be utilized as a scene response unit for law enforcement to avoid the 5150 and transport the patient to a voluntary treatment center to avoid unnecessary hospitalizations.	\$90,000
CONFIRE Inland Empire Public Safety Operations Platform (IEPSOP) – AMR will endeavor to transition to the CONFIRE Inland Empire CAD to CAD Hub which will allow for the rapid transmission of Computer Aided Dispatch data to all participating departments. The ability to receive data directly through a CAD-to-CAD interface saves valuable time in the dispatching process by eliminating unnecessary phone calls. Additionally, the CAD-to CAD interface will allow AMR to receive EMD determinant codes from participating departments that are using emergency medical dispatch procedures.	Initial \$150,000 to 200,000 with 25,000- 35,000 annually
Total	\$290,000

2021-2022 Contract Compliance Review

Item #	Summary of Contract Section	Evidence of Compliance
Article 2.2	Meet 91% response time performance in all RTZs for at least nine (9) non-consecutive months of preceding contract year.	Review of all 12 months of Monthly Compliance was completed. It is noted Feb-June 22 was submitted significantly late.
Article 6.1	Licensing and Permits are current.	All licenses and permits have been reviewed and are in compliance with the contract standard for all 3 divisions Riverside, Hemet, Desert Cities.
Article 8.1	Subcontract for work or services to have prior written approval of County Contract Administrator.	No changes for the 21/22 contract period. The Contractor holds public/private partnerships agreements with the City of Riverside, City of Corona, Morongo Band of Mission Indians, Soboba Band of Luiseno Indians. The contractor is currently in negotiations to enter into subcontracting agreements with Morongo Fire Department to supply additional ambulances to the Morongo Reservation and surrounding area in the Pass EMS zone.
3.1	Provide continuous ALS emergency ambulance services to residents and visitors of Riverside County 24 hours a day, every day; according to the EMS Plan.	Concurrently the Contractor provides real-time access to their digital computer-aided dispatch (CAD) system to REMSA staff including duty officers, and MHOAC program. This real-time access confirms continuous service provision. Retrospectively, the Contractor submits response data upon call completion and in monthly compliance reports. The contractor also complies with electronic patient care record (ePCRs) reporting requirements and provides the basis of Emergency Management Department's prehospital syndromic surveillance triggers including but not limited to: Unusual occurrences, Influenza like illness, Overdose reporting. Total Ambulance Responses 218,105, Total Transports 158,302 comprising 88% of the 911 emergency ambulance responses and 90% of all 911 emergency transports.
3.2	Contractor shall provide ground ALS emergency ambulance services for the exclusive operating areas and non-exclusive operating areas as stated in Attachments 1 & 2.	Deployment plan, staffing schedule, and actual unit hours for all service areas verified by REMSA staff. All ALS ambulances meet the criteria as outlined in Riverside County Ordinance 756.
3.2.3	Contractor may enter into a subcontract or partnership with REMSA authorized ALS ambulance provider for the Mountain operating area, subject to approval by REMSA	Contractor has no current subcontracts in place for the Mountain operating area. However in 2018 REMSA instituted a operational policy 2120 regarding closest ambulance utilization within the non-exclusive operating area of the Mountain Plateau. AMR currently refers 911 calls to Idyllwild Fire Protection District through AVL geolocation when they are deemed closest in compliance with Operational Policy 2120. AMR compliance excludes these referred calls for 911 Monthly Compliance Reporting.

Item #	Summary of Contract Section	Evidence of Compliance
3.5.1	Establish and maintain operations centers to effectively support operations and field staff, including deployment/equipment, management/supervision, education/training, and adequate living quarters for 24 hour units/supervisors if needed, and equipped with generator for backup operation.	Operational centers have been established since the beginning of 2015. No additional substations were opened during the performance period. Verifiable pictures and evidence has been provided that the existing locations are still in operation and provide 24/7 support and adequate living quarters to 24 hour units/supervisors as needed. Backup generators have been verified as well. No physical station inspections were conducted during the performance period but are expected to resume for next performance year period.
3.5.2	Establish and maintain an administrative headquarters for Riverside County operations.	The Contractor Administrative Headquarters is located at 879 Marlborough Ave, Riverside, CA 92507. Visited and verified by REMSA staff multiple times annually.
3.5.3	Maintain a communications center for system status management and dispatch of ALS emergency ambulances.	Co-located at the Administrative Headquarters in Riverside, the Contractors Dispatch Center received and handles all ambulance resource dispatch and coordination. Communication center has been visited by REMSA staff this year for administration meetings.
3.5.3.1	Communications center shall utilize radio and data communication plan approved by REMSA that digitally integrates Contractor communications and CAD with EMS response partners; plan shall contain provisions for redundancy in the event of primary. Communications systems failure.	Plan reviewed and approved by REMSA staff. VOIP back-up plan is in place. Digital CAD links have been established with the: City of Riverside Fire Department City of Corona Fire Department City of Murrieta Fire Department City of Hemet Fire Department Riverside County Fire Department Contractor is working with the Palm Springs Fire Department to implement CAD links and begun the preliminary work for joining the Countywide CAD-to-CAD project. AMR also maintains a COOP plan for maintaining communication with field crews and PSAPs during Technological outages. This includes CAD, Phone, and Radio failure procedures to maintain continuity of service for Ambulance response. The plan also includes if the dispatch center building had to be evacuated a designated alternative dispatch center at an undisclosed location is ready and equipped to maintain capabilities of the primary dispatch center.
3.5.3.2	Communications center shall be equipped with a generator capable of maintaining operations despite loss of power or other utilities.	Site inspections and verification performed by REMSA staff. Generator is checked at regular intervals on AMR's internal load plan.

2021-2022 Contract Compliance Review

Item #	Summary of Contract Section	Evidence of Compliance
3.5.3.5	Contractor shall provide REMSA with a written deployment and system status plan for the number of ambulances, their assigned locations, deployment strategies and shift schedules; changes to the plan must be provided to REMSA at least 30 days prior to implementation date of proposed change.	Contractor has deployed the Operational Performance Analytics Program (OPAP) to enhance analyses of demand and staffing. OPAP allows AMR to strategize and anticipate necessary staffing deployment during seasonal fluctuations, which was especially helpful during the COVID-19 response. All shift schedules and unit hours have been made available for REMSA inspection. Daily system ALS/BLS/CCT Scheduled and actual unit hours are available to REMSA staff via the System Daily Management report in Firstwatch.
3.6	Contractor may place ambulances in specific cities or communities of Riverside County; any contracts are subject to approval of REMSA.	Option not currently utilized by Contractor.
3.9	Contractor may provide non-transport special EMS programs as approved by REMSA.	Active and Non-transport programs include: Tactical EMS Team Program Bicycle EMS Program Pine Cove Community Service Program Honor Guard Approved special event medical services include: Stagecoach Festival Coachella Valley Music and Arts Festival March Air Show Riverside Air Show University of California Riverside: Block Party, Spring Splash, and Winter Solstice All large-scale special events are coordinated under REMSA special event policies. Prior to the events the medical plans were provided to REMSA for review and approval. However, all above events were cancelled due to ongoing COVID-19 pandemic.
3.11	Capitalization: 5 year refresh cycle for technology; expand infrastructure as needed; rate increase may apply.	Capital equipment list reviewed and verified by REMSA staff. Cardiac Zoll monitors, mobile data computers, modems and radios were replaced during the performance period. AMR changed to Apple iPad for ePCR documentation during this performance year.
3.12	Disaster Assistance and Response: Contractor to be actively involved in planning for and responding; shall implement ambulance back up and system surge plan as requested, to be coordinated through MHOAC. Point of contact individual shall be designated by Contractor as primarily responsible for disaster preparedness and planning coordination.	Contractor has participated in system surge planning in conjunction with MHOAC activities related to Flu/COVID 19 system surge planning initiatives. AMR participates in disaster drills including the Palm Springs Airport drill, and Coachella Music Festival pre-event drill event. Contractor maintains on call primary contact of Wayne Ennis for disaster related requests and immediate request availability through AMR communications directly.
3.13	Contractor shall assign a primary point of contact for ECC personnel and shall pay a fee for dispatch services provided by the County.	Contact information supplied to REMSA staff as well as ECC. Dispatch service fees are paid and up to date. Invoices reviewed and verified by REMSA staff.

Item #	Summary of Contract Section	Evidence of Compliance
4.2	Continuous Quality Improvement (CQI) Program Plan - Contractor shall develop and implement a CQI program that ensures optimal patient care and effective operations for all services under this Agreement. (4.2.5.1 - 4.2.5.11)	Contractor submitted an updated and current 2022 CQI Plan. Contractor also submitted current or updated OGL policies that cover but not limited to: Customer Patient Satisfaction, Patient belongings, Injury/illness prevention, Community Education, Human Resources, Safety, Fleet equipment performance and materials management, Unusual Occurrences incidents and complaint management, Leadership, Communications including deployment and system status management, and risk management. REMSA staff has reviewed and verified its contents.
4.5	Contractor shall employ a Medical Advisor who shall be a California licensed physician (MD or OD) employed as a 0.25 FTE minimum, and shall serve as primary liaison between Contractor and REMSA Medical Director for medical issues. REMSA Medical Director shall participate in selection process.	The Contractor's medical advisor is Dr. William Seth Dukes - in addition to his role as the medical advisor, he also serves as the Chairperson of the Prehospital Medical Advisory Committee (PMAC). He is actively engaged and participative in EMS system needs.
4.8	Contractor shall develop and implement a comprehensive Patient Satisfaction Program for services provided to patients in the Riverside County EMS System.	Contractor participates in a patient satisfaction survey process implemented by a company called EMS Survey Team. A percentage of patients from each division are randomly selected each month. The report aggregates and reports out for the performance period by division. Key demographics including customer satisfaction related to dispatching, ambulance, paramedic empathy, and billing service performance. Report also contains overall mean score and performance compared to similar companies of size and complexity. The surveys do not include partner agencies, PSAPS, Jurisdictional staff to measure there level of satisfaction with the Contractors performance.
4.9	Clinical Education and Training Program to be developed and implemented by Contractor using contemporary performance based methods and processes. Program shall be linked to the Contractor's CQI program and congruent with EQIP.	Contractor has concurrent field training officer program that is utilized for new hire employee training. The contractor CQI plan identifies issues of individual paramedic performance and has options for remediation including concurrent field observation up to and including the Providers medical director as necessary. Contractor also has through the REMSIS solution instituted peer review CQI from the Field training officer's perspective to give ongoing feedback to field providers documentation and clinical performance.

Item #	Summary of Contract Section	Evidence of Compliance
5.2.1	Contractor shall meet the response time standards, as described in Exhibit 5-A, a minimum of 90% of the time.	Response time reports until January 2022 have been received, reviewed, and validated by REMSA staff. Compliance for months of February to June have been overdue for several months and has required several administration meetings between REMSA staff and AMR to resolve the outstanding compliance reporting periods. After conclusion of the performance reporting period the Firstwatch Online Compliance Utility will be reviewed and changed to address the lessons learned regarding this performance period challenges.
5.2.3	Contractor agrees to cooperate with REMSA and EMS System participants to establish the Medical Dispatch System (MPDS).	Contractor has cooperated in various implementations of MPDS within City jurisdictions that have launched ProQA software. MPDS currently is available in 96% of the County and AMR has complied with administration policies concerning low acuity Omega, Alpha calls where a BLS ambulance can be properly utilized. However the contractor has sent BLS resources on MPDS advanced life support calls on numerous occasions and has been included as an attachment to show the BLS unit utilization in relation to MPDS determinant codes.
5.3	Contractor shall use REMSA approved CAD program synchronized to atomic clock and shall cooperate with REMSA and First Watch to provide and maintain continuous 24/7 data feeds and remote read-only access for real time monitoring and analysis of response time performance.	Tritech Cad is in place. REMSA staff have access to both VisiCAD tools and Firstwatch for system monitoring. Firstwatch OCU was not properly utilized this year as the Compliance data for months of February and June were missing.
5.3.2	Contractor shall utilize AVL/GPS linked to the digital CAD for real time tracking and monitoring capability.	AVL/GPS is integrated into the TriTech CAD. REMSA staff have access to VisiCAD for system monitoring. Contract also provided access to AVL/GPS data for response exemption approval process.
6.1	Contractor shall have a program to retain employees and minimize turnover.	Contractor provided competitive benefits, sign-on bonuses, paramedic upgrade bonuses, location relocation bonuses, educational assistance program, employee assistance program, employee discounts and 401k program. Contractor also provided an earn while you learn EMT program for AMR Riverside, and paramedic scholarship program to help reduce the numbers of paramedic vacancies.

Item #	Summary of Contract Section	Evidence of Compliance
6.1.1	Working with unions and an employee group to create an ongoing employee satisfaction assessment and monitoring system.	Contractor maintains Open Door Policy for encouraging employees to share suggestions, problems, and complaints. Program in place meeting every third Thursday between Contractor management and Union leadership including representatives, union president, and union stewards. Contractor has an onboarding survey for new employees that administered within the first 90 days. There is no ongoing satisfaction assessment or monitoring system in place outside of the labor management meetings.
6.1.2	Conducting exit interviews with employees leaving employment to identify the dissatisfies that could be driving employee turnover. Reports of such analyses and Contractor's improvement strategies will be available to REMSA.	Contractor supplied results from employee exit survey relating to reasons why they had separated employment from the company. Results are only from two of the three divisions with no explanation why Desert Cities was excluded. Results show a clear expectation in roles and responsibility of field crews from management staff. Lack of advancement and a low positivity rating regarding feeling valued as an employee of the Contractor showed heavily in the results regarding the exit survey.
6.1.3	Contractor will track and report employee turnover and results of employee satisfaction surveys annually to REMSA.	Contractor turnover survey results were reviewed and verified by REMSA staff. Contractor employee turnover by monthly performance ranges from 1.8% to as high as 3.5%. Top reasons are the same as previous performance years citing Hiring by Fire Department, Career advancement and return back to school as top three reasons.

Item #	Summary of Contract Section	Evidence of Compliance
6.2	Workforce professionalism - Standards of behavior to be implemented (14 points, 6.2.1-6.2.14) for all services rendered under this Agreement.	<p>6.2.1 Contractor's workforce professionalism standards are in place and defined within the Operational Guidelines Manual (OGL) and Employee Handbook updated on July 1 2020. The OGL manual includes all required contract standards and is updated on a regular basis and was reviewed by REMSA staff. 6.2.2 Pre employment and screening forms were provided and reviewed by REMSA staff. 6.2.3 Prospective employee criminal background checks examples have been provided and inspected by REMSA staff. Contractor has policies in place to exclude people from employment if background process prevents employment. 6.2.4 Contractor has demonstrated policies and procedures in place for vehicle, equipment, and station use and maintenance. 6.2.5 Policies regarding personal cleanliness and grooming are in place and inspected by REMSA staff. 6.2.6 Contractor has physical ability testing standards and policies in place to ensure a minimum physical fitness for duty. 6.2.7 Contractor maintains a regional and local Uniform standardization which includes cleanliness and appearance standards. The policies and uniform standards have been observed by REMSA staff throughout the year. 6.2.8 Contractor has secondary credentialing monitoring tools that is required through CAAS accreditation as well. REMSA maintains information security that personnel must have and an expired medical credential and if they do are locked out of the system. Prompting them to seek help and identifying any personnel that may be working with an expired credential. 6.2.9 Contractor has an OGL for patient interaction requirements that has been inspected by REMSA staff. 6.2.10 Contractor has regular staff meetings to education and update personnel when REMSA develops and pushes out a Protocol Update Course. Class rosters are available for inspection by REMSA staff. 6.2.11 Contractor regularly attends all of REMSA committee meetings including but not limited to: EMCC, PMAC, Stroke, STEMI, TAC, ePCR workgroup, Riverside County Fire Chief's Association. Contractor also has an operational guideline regarding external party interactions that has been reviewed by REMSA staff. 6.2.12 Contractor participates in local events such as Chamber of Commerce, Hospital association, and general public safety events as requested. Contractor also provides regular community training and education. 6.2.13 Contractor has a standing policy addressing etiquette and expectations of conduct.</p>
6.3	Organizational Staffing and Key Management Personnel: REMSA shall review and approve key management personnel. Contractor shall submit an organization chart and associated job descriptions to REMSA within sixty (60) calendar days of the signing of this Agreement (positions listed 6.3.1-6.3.9).	Contractor organization chart and job descriptions have been reviewed and approved by the REMSA contract administrator.

Item #	Summary of Contract Section	Evidence of Compliance
6.4	Credentialing for EMTs and Paramedics is required for all field personnel and shall be in conformance with REMSA policies and procedures.	All copies checked and verified by REMSA staff. Additionally, all contractors employees are registered within the Riverside County Emergency Medical Services Information System (REMSIS) Licensure Management System (LMS).
6.5	Ambulance Staffing requirements: Two REMSA accredited paramedics or a REMSA accredited paramedic and REMSA certified EMT. Field personnel uniforms and identifiers must conform to Contractor's policy, subject to REMSA approval. REMSA may authorize alterations to staffing requirements as part of EMD program.	Contractor's ambulance staffing standards are in place and defined within the Operational Guidelines Manual (OGL). OGL manual was reviewed by REMSA staff. REMSA staff performs periodic scheduled and unscheduled field checks and ambulance ride along.
6.6	Field Supervisor Program - one supervisor for every 15 ambulances in service by operation; meet REMSA credentialing criteria; have written program.	Contractor has a Riverside County Supervisor Plan and Operations Supervisor Training plan in place. The program was reviewed and approved by REMSA staff. Ratios are verified to be in compliance. REMSA has approved current supervisor staffing levels but has yet to establish a formal program for credentialing.
6.8	Employees Health and Wellness Programs (6.8.1, 6.8.1.1, 6.8.1.2).	Reviewed by REMSA staff. Contractor Employee Health and Wellness program is all inclusive in scope and comprehensive in content based upon contract requirements and recommendations by the County Health Officer or designee.
6.9	Contractor shall have a comprehensive FTO program approved by REMSA that establishes roles/responsibilities, employee eligibility criteria, credentialing and education/training requirements; FTO roles/responsibilities shall be integrated into Contractor's CQI plan and education/training programs.	Contractor has Field Training Officer (FTO) program in place. Reviewed by REMSA staff and approved by the Contract Administrator. FTO has begun utilizing REMSIS for peer review CQI for retrospective monitoring of new hire employees performance.
7.2	Establish policies and procedures for integration of radio and data communications with PSAPs, base hospitals, Public Health and Medical Communications Center, and on-scene incident command.	AMR has radio and telephone communication procedures in place. Policies and AMR OGLs were reviewed and approved by REMSA. It is recommended to update those policies including utilization of Public Safety Enterprise Communication system.
7.3	Operate a dispatch center located within Riverside County and maintain all hardware and software necessary to receive and fulfill requests for emergency ambulance services made by County PSAP Centers; capable of receiving and replying to requests by voice and by CAD interface; capable of dispatching all ambulance units. Contractor shall implement CQI program for evaluation of dispatch operations, education and training of dispatchers, problem identification and resolution. The Dispatch CQI Plan shall be submitted to REMSA within 180 days and updated with the Contractor CQI Plan.	Contractor's ambulance dispatch center is currently located at 879 Marlborough Ave Riverside, CA 92507 and is operational 24/7/365. REMSA has verified communication center capacity during routine site visits. Contractor's Dispatch CQI program is updated simultaneously with Contractor CQI Plan and is provided timely.

Item #	Summary of Contract Section	Evidence of Compliance
7.3.1	CAD and IT Support - maintain a Computer Aided Dispatch (CAD) system according to the specifications of REMSA that assures a complete audit trail for all response times and assures REMSA access to the response time data at any time to assure Contractor compliance.	Contractor has the TriTech CAD in place. REMSA utilize the VisiCAD tools regularly to audit response time performance and monitor system status. Sample work orders for CAD upgrades and changes have been reviewed by REMSA staff.
7.3.1.1	Contractor will establish and maintain digital CAD-to-CAD interfaces with PSAPs as requested and authorized by REMSA.	Over the past 6 years, AMR has established and maintained CAD integrations with all PSAPs who request are ready for integrations. Active CAD links have been established with: City of Riverside Fire Department City of Corona Fire Department City of Murrieta Fire Department City of Hemet Fire Department Riverside County Fire Department AMR is working with the Palm Springs Fire Department to implement CAD links and has begun the onboarding process in the Countywide CAD-to-CAD project.
7.3.1.3	Contractor shall ensure its own information system's hardware, software and personnel are capable of receiving and processing required data including, but not limited to, the ability to continuously monitor data transfer system stability and resolve system failures. In the event of a CAD outage Contractor shall deploy a continuity of operations plan, which shall be submitted to and approved by REMSA within thirty (30) calendar days of the signing of this Agreement.	Contractor's Business Continuity Plan is in place and has been reviewed by REMSA staff.
7.3.2	Supervisors - Contractor shall have a Dispatch Supervisor program for 24 hour supervision throughout the term of this agreement, which shall also contain requirements for employee eligibility, education and training.	Contractor Dispatch Supervisor Program is in place and is defined within the Operational Guidelines Manual (OGL). Program has been reviewed by REMSA staff.
7.3.3	Dispatcher/System Status Controller (SSC) and Call Taker Program shall be comprehensive and ensure effective dispatch operations 24 hours per day, every day throughout the term of this Agreement, which shall contain requirements for employee eligibility, education and training.	Contractor has continuously, 24/7/365, provided dispatch services to residence and visitors of Riverside County through performance period. Dispatcher/ System Status Controller and Call Taker program is in place and is defined within the Operational Guidelines Manual (OGL). Program has been reviewed by REMSA staff.

2021-2022 Contract Compliance Review

Item #	Summary of Contract Section	Evidence of Compliance
7.4	Radio and Data Infrastructure and Equipment Requirements - Contractor will provide REMSA with a comprehensive radio system/network design including, but not limited to, site selection, power, security, IP backhaul and inter-site communications. Should Contractor's radio communication system be upgraded or replaced within the term of the Agreement, Contractor at their cost will upgrade and/or replace their radio communication equipment to be compatible with and operate on the new system. Modifications to the radio system/network shall be proposed to REMSA for approval at least thirty (30) calendar days prior to initiation of work.	AMR has provided a technical and architectural review of the radio communication system developed by Rivcomm. It is also noted that the next performance year will be 5 years in operation of the equipment and will be earmarked for a refresh and utilization of the County's designated communication network Public Safety Enterprise Communication (PSEC) that is already used by public safety partners in the area.
7.4.1	Unit Mobile Radios - Contractor is responsible for the communications equipment on ambulances and supervisory units; Contractor shall equip all ambulances and supervisory vehicles with radio equipment for communications with Contractor's dispatch center on Contractor's radio channels.	Radio equipment is verified by REMSA staff during ambulance permitting inspection. REMSA intends to migrate all online medical control over to the Public Safety Enterprise Communications (PSEC) system.
7.4.1.1	Radio communications equipment used for ambulance-to-hospital communication shall be configured so that personnel providing patient care are able to directly communicate with base or receiving hospital staff regarding the patient.	All Contractor ambulances are equipped with cellular phones and MedNet Radio consistent with REMSA policy. REMSA intends to migrate all online medical control over to the Public Safety Enterprise Communications (PSEC) system.
7.4.1.2	Approved radio equipment shall be installed in conformance with existing REMSA policies prior to assignment of a vehicle to an emergency response area. Installations and removals will be at Contractor's expense.	Contractor radio equipment is installed in accordance with REMSA policies. Verified by onsite inspection by REMSA staff.
7.4.1.3	Contractor shall operate communications equipment in conformance with all applicable rules and regulations of the Federal Communication Commission, and in conformance with all applicable REMSA policies and operating procedures.	Operational guidelines (OGL) and FCC licenses reviewed and verified by REMSA staff. Found to be in conformance with all REMSA policies and procedures.
7.4.2	Portable or Handheld Radios - Contractor will provide each crew member assigned to an ambulance or supervisor unit with a VHF portable radio programmed annually as specified by REMSA. Contractor shall maintain a minimum cache of twenty (20) spare radios for back-up purposes.	Contractor replaced the usage of pagers with cellphones. Contractor is utilizing Zipit application for cellular connectivity. Radios have been inspected by REMSA staff to be in compliance with REMSA Radio Standards policy.

Item #	Summary of Contract Section	Evidence of Compliance
7.4.3	Mobile Data Computers (MDCs) – Contractor shall equip each emergency ambulance and supervisor vehicle with a MDC that is capable of receiving and sending response related information to and from the vehicles. Contractor shall provide REMSA with the specifications for approval of any new MDCs to be used in the vehicles prior to purchase. All existing MDCs shall be afforded grandfathered approval by REMSA upon signing of this Agreement.	Equipment has been verified by inspection by REMSA staff. Technical specifications and VisiNet Mobile Training Manual reviewed by REMSA staff. New MDTs were installed. GIS support services are being provided through EMD staff to support and facilitate latest mapping layers to ensure timely response for Contractors resources.
7.5	Global Positioning System (GPS) and Automatic Vehicle Location (AVL) - Contractor will provide an Automatic Vehicle Locator/Global Positioning System (AVL/GPS) solution integrated with ambulance and supervisor vehicle MDCs, including the equipment, software, and ongoing maintenance, solely at Contractor’s expense. Contractor’s ambulances and supervisor units must be equipped with a wireless modem and GPS receiver that links to its communications center’s CAD system to track vehicle locations and select the closest available unit. Contractor shall supply AVL/GPS feeds to REMSA and other public safety agencies as authorized and requested by REMSA.	Contractor GPS and AVL equipment is in place and frequently utilized by REMSA staff for monitoring response time performance and ambulance routing. GIS support services are being provided through EMD staff to support and facilitate latest mapping layers to ensure timely response for Contractors resources.
7.6	Radio Frequency Use, Management and Credentialing - Contractor will provide REMSA copies of all radio frequency records and will coordinate all frequency licensure activity through REMSA.	FCC licensing reviewed, verified and found up to date by REMSA staff. REMSA communicates regularly with the County Communications licensing coordinator to assure compliance. (Updated License provided by Mark karlin)
7.7	Communications Equipment Replacement - Contractor agrees to replace communications equipment according to a five year technology refresh cycle. Equipment that provides new capabilities to operations above established baseline capabilities at the effective date of this Agreement may be included in annual improvement and enhancement goals; replacement of existing equipment that has reached the end of its five year cycle shall be considered baseline operating maintenance and shall not be included in the formulation of annual improvement and enhancement goals.	Contractor’s communications capital equipment list reviewed and verified by the Contract Administrator. Equipment purchase orders have been reviewed and verified. Next performance year Contractor will be expected to adopt the Public Safety Enterprise Communication (PSEC) system for primary means of communication for 911 calls and Paramedic Base Hospital communication.
7.7.1	Contractor's computer aided dispatch (CAD) system will not be included in the technology refresh program; however, the Contractor shall utilize upgrades offered by their CAD vendor if they are applicable to the Contractor's service offerings under this Agreement.	Contractor's current CAD configuration meets the requirements. Regular CAD upgrades that provide for more robust daily and roll-up performance reporting and monitoring have been completed and are on-going. AMR is currently involved in an improvement project to utilize AVL and GPS geofencing to arrive ambulances at hospital more consistently in conjunction with research associated with the Patient Continuum report published by REMSA staff.

Item #	Summary of Contract Section	Evidence of Compliance
8.1	Customer Service Excellence - Develop and implement customer service program to establish and maintain customer service excellence. Include qualitative and quantitative evaluation of customer feedback. Findings and metrics to be included in the APR shall document and incorporate feedback from, but not limited to, the following customers: (8.1.1 - 8.1.6)	During the performance period AMR received consistent responses to surveys by various agencies and stakeholders including Fire Departments, Cities, Hospitals and other medical facilities. Results were overall positive with the majority of responses from hospital staff. There were no dissenting opinions about services or quality of personnel willing to help and integrate into the health teams. Most notable responses were from the AMR Hemet operation and Jack Hansen as their operations manager.
8.2	Community Education Program - Provide a minimum of one hundred and twenty (120) hours per year for each ambulance operating area, as defined by Attachment 1, Operating Areas. Prepare an annual Community Education Plan with specific goals and objectives as to meet or exceed minimum acceptable levels set by the EMS Administrative Group for that operating area. Plan shall include but not be limited to the following elements: (8.2.1 - 8.2.5)	Contractor provided 855 hours of public and partner education across the eight (8) ambulance operating areas and other areas of the County. Education included Health and Safety Fair, Community CPR, File of Life, Ambulance Demonstrations, Air Ambulance Demonstrations, Every 15 minutes awareness campaign, and Kid safe. All hours were accounted for in the Annual Report and verified by REMSA staff. Contractor also has a deployable mobile training unit containing a high fidelity training simulator to complete any necessary medical trainings to the public or internal staff.
8.3	Communications with Electronic or Print Media - Contractor will notify REMSA of all communications with media when it pertains to services performed within the scope of this Agreement	REMSA received notification from the Contractor each time there was a media inquiry.
9.1	Ambulances - Shall meet the standards as specified in Riverside County Ambulance Ordinance No. 756 or any other REMSA approved program, policy, protocol or procedure governing the provision of ambulances and equipment. All emergency ambulances used for prehospital care and transport shall be Type III (Modular) ambulances that conform to the highest standards for crash safety rating, passenger/patient safety systems, and shall have less than 250,000 miles of service. All exterior colors, lettering, graphics and markings on ambulances and supervisor vehicles must be approved by REMSA. All ambulances utilized for response to 9-1-1 and prehospital emergency calls shall meet or exceed CAAS standards.	Confirmed by REMSA staff through vehicle inspections and spot checks. All ambulances meet the required criteria. 100% of the ambulance fleet comprise of types III ambulances. Verified, through the permit process, that all ambulances meet CAAS standards. During this performance year AMR has purchased and is utilizing 1 all electric ambulance for testing.

Item #	Summary of Contract Section	Evidence of Compliance
9.2	Vehicle Maintenance Program - Institute and maintain a preventative vehicle maintenance program approved by REMSA. The program shall include sufficient service sites strategically located throughout Contractor's service areas so that out-of-service time is limited. The program shall contain, but not be limited to, metrics for annual miles driven, lost unit hours due to mechanical failures, number of mechanical failures and vehicle accidents. These metrics shall be included in the annual performance report to REMSA.	Program has been reviewed and approved by REMSA. Contractor's ambulances compiled 7,942,849 miles during the performance period. During that period there were 13 vehicle contacts (accidents) which is one vehicle contact per 610,988 miles driven by the Contractor's field employees. Contractor has equipped the fleet with DriveCam for several years. This helps monitor and root cause and identify risky behavior. This has led to coaching and counseling changing driving habits that has been shown to reduce incidents per the Contractor.
9.3	Field Supervisor Vehicles - Shall have less than 250,000 miles of service on the entire vehicle (engine, drivetrain, chassis, truck body and all associated major parts). Each field supervisor on-duty shall be assigned a dedicated emergency response vehicle (ERV) which shall meet all requirements for designation as an ERV and be equipped pursuant to REMSA specifications.	Field Supervisor vehicle mileage logs and specifications submitted to REMSA and has been verified. Contractor has purchased and begun using one all electric supervisor (Ford Mustang Mach-E) vehicle.
9.4	Durable Medical Equipment - Provide field personnel standardized durable medical equipment as specified by the REMSA standard drug and equipment list or as approved by REMSA for use within a specialty EMS services program. Contractor shall fully support achievement of the County EMS System Strategic Plan objectives and comply with resulting REMSA policies for equipment standardization with First Responders.	REMSA staff reviewed the Contractor's capital equipment, durable medical equipment, and ambulance par level sheets. All meet REMSA policy equipment standards for ALS and BLS ground transport services including the recent implementation of iGEL airway implemented during this performance period.
9.4.1	Contractor shall have a durable medical equipment maintenance program. Critical failures of medical equipment shall be reported consistent with applicable laws and to REMSA. Lost unit hours due to equipment failure or malfunctions shall be reported to REMSA monthly and included in Contractor's annual performance report to REMSA.	All service agreements were submitted to REMSA for review including contracts for Stryker (Ambulance Gurney), and Zoll (Cardiac Monitor). Equipment failure records are available to REMSA upon request. Lost unit hour reports are available through the Daily Management Report supplied by Firstwatch that tracks all out of service reasons available in real time and retrospective to REMSA staff 24/7.
9.4.2	Mandatory Cardiac Monitor Purchase – Contractor shall purchase new cardiac monitors for every ambulance used under this Agreement. REMSA shall specifically identify the new monitors to be purchased by Contractor and the new equipment shall be in service by January 1, 2016.	Contractor completed rollout of all new Zoll Cardiac monitors during the last year of performance period. Invoices for the new monitors were submitted to REMSA. The new monitors and associated field employee training were verified and approved by REMSA.
9.5	Disposable Medical Equipment - Equip and supply ambulances according to REMSA policies, protocols and procedures. REMSA written approval required to modify inventory.	Contractor has implemented an ambulance check list to assure daily compliance for every ambulance before it is deployed. The equipment checklist has been reviewed and verified by REMSA staff.

Item #	Summary of Contract Section	Evidence of Compliance
9.5.1	Ambulance Equipment/Supplies Restock - Submit a detailed written plan to maintain adequate equipment and supplies on all ambulances. Include provisions for support services strategically located across the County to maximize unit in-service time and minimize out-of-service time. Report lost unit hours due to equipment restock monthly and include in APR.	Plans is up to date and continues to be tested with the COVID-19: Contractor has established guidelines (OGL) for equipment restock and has deployment centers/restock locations in place across the County. Out of Service hours continues to be tracked and available in the Daily Managment Report and trigger through firstwatch to REMSA staff.
9.6	Equipment and Supply Cache - maintain an on-site inventory of equipment sufficient to ensure continued, uninterrupted operations for 14 calendar days in the event of a large scale disaster.	Tested as part of the COVID-19 pandemic: Contractor maintains a 14 day supply and equipment cache at each location. Equipment cache's are available for inspection and Hemet, Beaumont, Idyllwild, Palm Springs, La Quinta and Menifee deployment locations. Additional equipment and supplies are supplemented with trailers.
10.1	REMSIS - REMSIS shall consist of an ePCR platform, secure data base and analytical/reporting tools pursuant to REMSA specifications. Contractor shall utilize REMSIS ePCR to capture and transmit patient care reports and data, and by REMSA to perform clinical quality oversight for medical services provided by Contractor.	Contractor has updated its OGL effective 01/28/2020 to be complaint with ePCR ImageTrend requirements per REMSA policy 7701 and 7702. Contractor participates in the REMSIS data collection program including timely submission of NEMSIS 3.4.0 complaint records and is compliant with CEMSIS Title 22 regulations.
10.1.1	An ePCR shall be created, completed and transmitted to the data server for every EMS response and prehospital transport by Contractor.	Contractor submits roughly 75% of all applicable ePCR's pertaining to an EMS response. Contractor does generate for every patient transport and operates above normal behavior of other EMS First response and transport agencies. Next performance period will include a reconciliation report and process tied to EMS responses with a fine structure attached as outlined in section 10.5 of the contract.
10.1.3	Contractor shall pay costs that include personnel, support, vendor maintenance, hardware and software procurement, annual maintenance and upgrades, annual County IT oversight for REMSIS and associated information systems as per County Fee Schedule, Exhibit 14-A.	Fees received by REMSA and verified by invoice and accounts receivable. EMD Fiscal staff are reviewing all REMSIS related documents as part of routine audit.
10.2	Dynamic Performance Monitoring - First Watch will be used as a data reporting application for the near real time evaluation of operational performance, response time data, clinical data and syndromic surveillance. First Watch shall interface with REMSIS, Contractor CAD and other data systems as required, and shall utilize the following features:	The FirstWatch integration, as part of the REMSIS program, is continuously utilized as a part of this agreement for concurrent and retrospective contract compliance and clinical data validation. The AMR CAD is directly linked with FirstWatch and the ImageTrend ePCR system. This process was used for COVID-19 response, Influenza like illness tracking, pediatric response and surge. This regulatory oversight method has improved situational awareness for all Riverside County stakeholders. The AMR Monthly reports are processed within the FirstWatch Online Compliance Utility (OCU) Module.

2021-2022 Contract Compliance Review

Item #	Summary of Contract Section	Evidence of Compliance
10.3	Monthly and Annual Performance Reports - Monthly reports within 15 working days following the end of each month. The APR shall be provided by the first work day of September each year and shall include but not be limited to the following elements:	The Contractors monthly reports are processed within the Firstwatch Online Compliance Utility (OCU) Module. During the 3rd and 4th quarters of the performance period AMR failed to submit monthly reports by the required deadlines of the performance month periods. Contractor is actively working to finish the completed reports for EMS system enhancement fees can be levied and distributed to the EMS system stakeholders. Lessons learned from this process will require an overhaul of the OCU process, including but not limited to automation of exemption requests related to bed delay and other exemption requests that may be determined through algorithmic review of data sources.
10.3.12	Strategic plan goals/objectives for the year - completed system improvements and enhancements	Upgrades to cellphones from pagers, upgraded AVL Modems, MDT's, Trittech Refresh, Cisco Refresh, ImageTrend ePCR Devices, mobile training available to community partners for enhanced training experience, continues to support AVL program, Citizen CPR training, agreement in place for Behavioral Health Response unit slated for FY 22/23 in the San Jacinto EMS Zone. Completed transition to Zoll Cardiac Monitors, continued participant in CMS ET3 Telemedicine pilot program. Contractor has begun the onboarding process to the Inland Empire Public Safety Operations Platform (IE PSOP).
10.3.13	Activities and results of the CQI Plan	Compliant and submitted as part of the annual CQI update.
10.5	Missing Patient Care Reports (PCRs) - REMSA may assess a fee of \$100 for every PCR that is not submitted to the REMSIS database within the time specified by REMSA. The fee amount will be included as part of the quarterly invoices.	Contractor is not creating 100% of non transport EMS responses. Reconciliation report and process is planned to assess penalty fees in relation to this clause of the Contract. All reporting and reconciliation processes will be created through firstwatch and reported in conjunction with their other monthly performance reports.
11.1	Integration with the MHOAC Program - During response to mass casualty incidents or disasters within or effecting the County, Contractor operations shall fall under management and coordination of the MHOAC as a function of the Medical/Health Branch in support of the County Emergency Operations Plan (EOP). Contractor shall participate in disaster drills and DMS training programs as requested by REMSA.	Contractor's Disaster program was tested and stressed continuously throughout the reporting period. The relationship developed over the years was instrumental in finding solutions to complicated, time-sensitive incidents. Contractors' disaster coordinator contact information has been supplied to REMSA and EMS system partners. Some of the operations that occurred during this performance period was evacuation of bed ridden patients during the Fairview fire including repatriation efforts at its conclusion. These coordinated efforts were in conjunction of an on duty MHOAC duty officer.

Item #	Summary of Contract Section	Evidence of Compliance
11.3	Contractor shall at all times have two (2) type II immediate need Ambulance Strike Team (AST) and one (1) type II planned need AST available for deployment upon authorization from the MHOAC. Contractor shall maintain and operate the two (2) County acquired Disaster Medical Support Units (DMSU), of which one will be located in the Eastern County and one will be located in the Western County.	The contractor maintains two DMSUs, (1) in Hemet and (1) in Palm Springs. The DMSUs were activated and deployed multiple times during the COVID-19 pandemic to augment supply and supervisory functions. The vehicle was inspected by REMSA staff during an ambulance permit inspection.
11.5	Disaster Coordinator shall be identified and shall participate fully in all MHOAC planning and response activities as requested by REMSA.	The AMR Disaster Coordinator is Paramedic Supervisor, Gary Denham. The lasting effects of the COVID-19 pandemic was continuous throughout this performance period including the influenza like illness cases that continue to rise in Riverside County. Gary and many other AMR supervisors were integrated into to the Riverside County MHOAC program.
12.1	Contractor shall enter into public/private partnerships with First Responder agencies to maximize the functional capacity and efficiency of an integrated and cooperative two tiered Regional EMS System. Agreements are subject to approval by REMSA. Contractor response time requirements may be lengthened by a maximum of two minutes in Metro and Urban areas only to facilitate partnerships, with REMSA approval.	The Contractor holds public/private partnership agreements with the City of Riverside and Corona. The Response Time Standard in the City of Corona and the City of Riverside is 12 minutes (10 Minutes + 2 minutes). This agreement supports the first response paramedic (ALS) programs in each city, respectively. Contractor has recently entered into a agreement for augmented Ambulance response in the pass zone with Morongo Fire Department.
12.1.3	Within one year of the signing of this agreement, Contractor shall demonstrate good faith effort to establish support agreements with all Fire Departments authorized by REMSA to provide ALS First Responder services.	No Changes for this reporting period: All requested agreements have been established with first responder agencies. No "supply" related complaints were reported to REMSA during the reporting period.
12.2	Equipment Supply, Inventory and Restock - Contractor will develop mechanisms to restock disposable equipment and supplies (as detailed on the First Responder Standard Drug and Equipment lists) other than narcotics used by First Responders when treatment has been provided by First Responder personnel and the patient is transported by Contractor. Contractor shall submit written plans for accomplishing First Responder restock to REMSA within 90 days of the signing of this Agreement.	No change: agreement review by REMSA staff and no "supply" related complaints were reported to REMSA during the reporting period. The agreements are current and active.
13.5	Financial Reports and Audits - Contractor will provide quarterly unaudited financial statements, in a format prescribed by REMSA.	The contractor submitted all quarterly unaudited financial statements on time. Post completion of the calendar year of 2022.

Item #	Summary of Contract Section	Evidence of Compliance
13.6	Billing/Collection Services - Contractor shall assist REMSA to evaluate the billing accuracy and customer service provided by their billing department. Contractor shall include customer/patient feedback in their customer services program. The APR will include metrics of the number of billing complaints and compliments.	Contractor received 488 billing complaints during the performance period. 319 were substantiated claims while 169 were unfounded. All have been resolved. The top three billing complaints were; 1. The wrong patient was billed 2. Cash or refund issue 3. Insurance on file was not billed. All billing complaints were resolved.



VIA USPS-CERTIFIED MAIL

March 14, 2023

American Medical Response
879 Marlborough Avenue
Riverside, CA. 92507
Attention: Jeremey Shumaker, Senior Regional Director of Operations

VIA EMAIL: Jeremey.Shumaker@gmr.net

RE: Performance Period Fiscal Year 21/22 Requested Earned Annual Renewal

Dear Mr. Shumaker

The Riverside County EMS Agency has received your request for a one year earned annual renewal for the performance period ending on June 30, 2022.

After careful review of all submitted documentation, the request for a one year earned annual renewal has been denied based on the bullet points below. The term for Agreement #15-097: Ground Emergency Ambulance Service remains unchanged and is set to expire on June 30, 2026.

- Did not meet minimum (90%) or enhanced (91%) response time performance for the months of February, March, April, May, and June 2022.
- Submission of monthly compliance reports within 15 days of the end of each month.
- Submitted an incomplete annual report (missing 5 months of data).
- Non-compliant with the ALS mandate, sending BLS ambulances to ALS level calls outside of the approved Emergency Medical Dispatch program approved by REMSA.

Should you have any questions, please contact us.

Sincerely,

Dan Bates
EMS Administrator
Riverside County Emergency Medical Service Agency



City Chief, City of Murrieta ✓

Riverside County Board of Supervisors Request to Speak

Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject to Board Rules listed on the reverse side of this form.

SPEAKER'S NAME: Bernard Molloy

Address: 41825 Juniper St

City: Murrieta Zip: CA

Phone #: 619.248.6822

Date: 3.28.2023 Agenda # 2.10

PLEASE STATE YOUR POSITION BELOW:

Position on "Regular" (non-appealed) Agenda Item:

Support Oppose Neutral

Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below:

Support Oppose Neutral

I give my 3 minutes to: _____

BOARD RULES

Requests to Address Board on "Agenda" Items:

You may request to be heard on a published agenda item. Requests to be heard must be submitted to the Clerk of the Board before the scheduled meeting time.

Requests to Address Board on items that are "NOT" on the Agenda/Public Comment:

Notwithstanding any other provisions of these rules, a member of the public shall have the right to address the Board during the mid-morning "Oral Communications" segment of the published agenda. Said purpose for address must pertain to issues which are under the direct jurisdiction of the Board of Supervisors. **YOUR TIME WILL BE LIMITED TO THREE (3) MINUTES.** Donated time is not permitted during Public Comment.

Power Point Presentations/Printed Material:

Speakers who intend to conduct a formalized Power Point presentation or provide printed material must notify the Clerk of the Board's Office by 12 noon on the Monday preceding the Tuesday Board meeting, insuring that the Clerk's Office has sufficient copies of all printed materials and at least one (1) copy of the Power Point CD. Copies of printed material given to the Clerk (by Monday noon deadline) will be provided to each Supervisor. If you have the need to use the overhead "Elmo" projector at the Board meeting, please ensure your material is clear and with proper contrast, notifying the Clerk well ahead of the meeting, of your intent to use the Elmo.

Individual Speaker Limits:

Individual speakers are limited to a maximum of three (3) minutes. Please step up to the podium when the Chairman calls your name and begin speaking immediately. Pull the microphone to your mouth so that the Board, audience, and audio recording system hear you clearly. Once you start speaking, the "green" podium light will light. The "yellow" light will come on when you have one (1) minute remaining. When you have 30 seconds remaining, the "yellow" light will begin to flash, indicating you must quickly wrap up your comments. Your time is up when the "red" light flashes. The Chairman adheres to a strict three (3) minutes per speaker. ***Note: If you intend to give your time to a "Group/Organized Presentation", please state so clearly at the very bottom of the reverse side of this form.***

Group/Organized Presentations:

Group/organized presentations with more than one (1) speaker will be limited to nine (9) minutes at the Chairman's discretion. The organizer of the presentation will automatically receive the first three (3) minutes, with the remaining six (6) minutes relinquished by other speakers, as requested by them on a completed "Request to Speak" form, and clearly indicated at the bottom of the form.

Addressing the Board & Acknowledgement by Chairman:

The Chairman will determine what order the speakers will address the Board, and will call on all speakers in pairs. The first speaker should immediately step to the podium and begin addressing the Board. The second speaker should take up a position in one of the chamber aisles in order to quickly step up to the podium after the preceding speaker. This is to afford an efficient and timely Board meeting, giving all attendees the opportunity to make their case. Speakers are prohibited from making personal attacks, and/or using coarse, crude, profane or vulgar language while speaking to the Board members, staff, the general public and/or meeting participants. Such behavior, at the discretion of the Board Chairman, may result in removal from the Board Chambers by Sheriff Deputies.

AMR ✓

Riverside County Board of Supervisors Request to Speak

Submit request to Clerk of Board (right of podium), Speakers are entitled to three (3) minutes, subject to Board Rules listed on the reverse side of this form.

SPEAKER'S NAME: JEREMY SHUMAKER

Address: 879 Marlborough Ave

City: Riverside Zip: 92507

Phone #: 805-312-6433

Date: 3/28 Agenda # 2.10

PLEASE STATE YOUR POSITION BELOW:

Position on "Regular" (non-appealed) Agenda Item:

 Support Oppose Neutral

Note: If you are here for an agenda item that is filed for "Appeal", please state separately your position on the appeal below:

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