

CONTRA COSTA COUNTY EMS MODERNIZATION PROJECT

Overview

Fitch & Associates proposes to conduct an evaluation of the Contra Costa County EMS system utilizing a “greenfield” or “whiteboard” approach. These methodologies begin with no preconceptions that the current system is doing what it should be doing and in the manner that produces the greatest benefit.

This structured process allows questioning of the status quo; including services and the manner they are delivered, performance requirements, roles, goals, and visions for the future. All options are available for consideration, and it allows for potential fundamental changes in funding, structure, and activities.

The evaluation process will have two overriding objectives:

1. To recommend actions and decisions based on benefits to patients and the community.
2. To recommend roles and activities based on value – cost versus benefit.

Focus Areas for Scope of Work

The proposed scope of work dated October 24, 2012 forms the basis of the EMS modernization project. An addition to the scope is to identify short term actions to address substantive issues impacting EMS. These include: the closure of fire stations and the reduction of resources available for medical first response, and changes in the healthcare facility capabilities and needs within Contra Costa County.

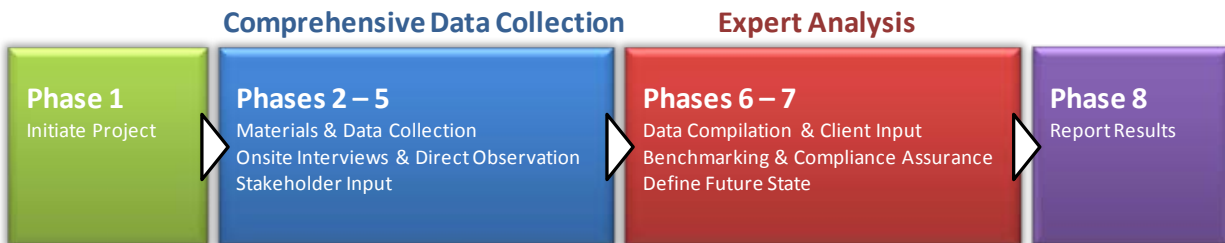
The consulting team will focus on these immediate issues and use a shortened multi-phase process as described later in this document to develop recommendations for the County. These recommendations will include short-term action steps designed to mitigate and respond to the urgent challenges. Within 30 days of the initiation of the process the Board of Supervisors will receive these recommendations for action.

Another enhancement to the initial proposed scope of work is to evaluate alternative models of delivery of medical first response. We will work closely with fire agencies to evaluate options for the provision of medical first response within Contra Costa County.

Eight-phase Project Work Plan

We have organized our work into eight phases. In each phase, we describe the purpose of the phase and what will be included in completing it. The work plan starts with establishing the scope and process, involves comprehensive data collection, and concludes with the final report. All eight phases will be completed within 40 weeks.

Figure 1. Eight-phase Work Plan



Phase 1—Initiate Project

Phase one is designed to confirm the project schedule and deliverables and to initiate information gathering procedures. The first task involves conducting Level “1” interviews with key members of the EMS system. These will include individual meetings with important stakeholders including:

- County Representatives
- Community leaders
- Dispatch representatives
- Fire Agency Leadership
- Medical Director
- Hospital, Health Care Systems, and Health Care Plan Representatives
- Emergency ambulance service provider
- CCT, BLS and interfacility ambulance service providers
- EMS Agency representatives

The Level “1” interviews provide a candid opportunity to meet with the policy makers of the EMS system and to get a clear foundation for the expectations of the project’s goals, management, and outcomes. Included is the reaching of agreement on the framework of the evaluation, a commitment of resources and support to the project, and the initiation of direct dialogue for troubleshooting. The important end-point of phase one is an understanding the expectations of key system leaders and setting the stage for a successful project.

Phase 2-Materials and Data Collection

Following the Level “1” interviews, we will utilize an Information and Data Request (IDR) instrument to collect detailed information from the County, communications center, fire agencies, ambulance provider, and medical stakeholders. The Fitch & Associates’ IDR has been used in hundreds of organizations over the last 27 years, but will be modified and targeted to meet the specific objectives of this project. Use of this instrument allows us to access key information about your system and compare your results to other organizations. The instrument is delivered in an electronic format with a defined deadline for completion. The IDR data is essential for shaping initial questions, guiding onsite planning, and shortening follow up requests for materials. Thorough and timely review, completion, and submission of the data expedite the completion of the project.

The IDR component ensures the project team fully understands the current state of the system and forecast the essential elements of the on site evaluation. Commitment to participating in phase two sets a strong foundation for the project’s success.

Phase 3—Onsite Interviews and Direct Observation

Prior to the initiation of phase three, the project team will have thoroughly reviewed all materials compiled and submitted as part of the IDR process as well as the notes from the Level “1” interviews. The deployment analysis will be in progress. In Phase 3, we will visit with individuals at various levels of the organization including:

- EMS Agency management and staff
- Fire Administration
- Elected Officials
- County Administration
- Labor groups
- Healthcare system representatives
- Receiving hospital personnel
- Dispatch/PSAP management
- Ambulance contractor personnel
- Physicians involved in EMS
- Medical Director
- Information Management personnel from County, Contractor, Dispatch Centers, etc.
- Others

The majority of the interactions will occur in either one-on-one or small group interviews around specific processes or operational functions (e.g. dispatch, first response, etc.).

Phase 3 is an important component of the review. It allows the consultants to take what they have discovered through the IDR process and add to it by interviewing key stakeholders and observing operational practices. During and immediately following this phase, it is common for the project team to determine what additional information is required.

Phase 4—Stakeholder Input

It is impossible to fully appreciate how a large system operates without seeking broad input from a variety of stakeholders. Through the use of stakeholder meetings, system participants from various entities within the EMS system have an open forum to engage in dialogue about the system, understand history, identify best practices, and highlight opportunities for the future. In Phase 4, the project team will host multiple group meetings. Invitations will be open to system participants and the process will be facilitated by an experienced team member. The group sessions will be scheduled for two hours, but will go as long as the group requires. Information developed from the groups will be included with the data collected in the first three phases.

Phase 5—Data Compilation and Client Input

At the conclusion of Phase 5, the project team will have collected a large amount of data from requested materials, interviews, and stakeholder meetings. After comprehensive review, the data will be organized and catalogued to facilitate the building of a logical report that meets the scope of work of the project and any additional areas identified. The consultants will visit with targeted system participants to review specific data, ask follow up questions, and gain added perspective to ensure appropriate understanding of what the results reflect. This will conclude requests for data from the client or any of its related entities.

Phase 6—Benchmarking Process

In this phase, the project team will review the data collected from the Contra Costa County's EMS system and compare it to available benchmark data, key industry standards, contemporary research, and with other systems of similar model and demand that are in the Firm's database of client reviews.

Phase 7—Define Future State

A key outcome of the project is to provide you with a clear understanding of the EMS system's current performance, prioritized actions for improvement, and recommend potential future states. The County seeks to determine creative ways efficiencies and effectiveness could be improved and seeks to objectively review potential options for delivering cost-effective high quality EMS.

In Phase 7, the project team will develop a list of recommendations for improving processes to effectively integrate the activities of system participants to provide EMS consistent with industry benchmarks. The recommendations will be designed to ensure:

- Equity of response times,
- Quality clinical care,
- Appropriate utilization of resources,
- Integration of healthcare providers, and
- Cost-effective delivery of services.

The report will outline multiple options for future actions and options for the EMS system and discuss the pros, cons, and financial impact of each. This phase will be where the key results of the project come together.

The specific tasks required regarding the evaluation of the existing EMS agreements and recommendations for provisions to be included in future agreements to improve clarity of expectations, accountability, transparency, and funding allocations will be undertaken and developed in this phase

Phase 8—Report Results

The deliverables from Phases 1 through 7 will be consolidated into a formal narrative report. A discussion draft of the report will be provided for review as decided in conjunction with the County's project lead. The final report will be delivered electronically within the 40-week project time frame.

The results will formally be presented in person at the conclusion of the project. This will also allow stakeholders to have a question and answer session with members of the consulting team. The presentation will occur at a time and location mutually agreed upon with the County.

Deliverables

The specific deliverables for the Contra Costa County project include tangible products and intangible benefits. The intangible benefits are derived from the face-to-face interaction with system stakeholders through interviews, surveys, and group presentations and forums.

The tangible deliverables will be comprised of an initial presentation and summary of short-term action steps recommended to address the immediate issues and a final comprehensive report with sections addressing each of the scope areas. The acceptance of the recommendations in the final report will form the basis to develop the RFP for the county's emergency ambulance service provider.

Work Plan and Timetable

The Proposed Scope of Services Yields Desired Outcomes

The proposed scope of work demonstrates that we understand the desired outcome and have proposed projects and tasks to achieve that outcome. A table for each of the proposed phases, activities, and time frames is attached to describe the project more clearly. We have outlined the projects and tasks based upon accomplishing the project within a 40-week completion schedule.

Fee Estimate

Fitch & Associates estimates that the project will require more than 700 consultant hours. We propose a project price with progress payments made based on milestones completed. Professional fees for the project are \$175,000. Travel and expenses are estimated at \$23,500. The total price of the project is \$198,500, inclusive of travel and expenses.

Phase/Task		Week										Week									
		1 to 2	3 to 4	5 to 6	7 to 8	9 to 10	11 to 12	13 to 14	15 to 16	17 to 18	19 to 20	21 to 22	23 to 24	25 to 26	27 to 28	29 to 30	31 to 32	33 to 34	35 to 36	37 to 38	39 to 40
Immediate Action Steps																					
1.1	Identify needed interviews																				
1.2	Schedule onsite																				
1.3	Conduct interviews																				
1.4	Analyze Issues																				
1.4	Develop immediate action recommendations																				
1.5	Present recommendations																				
Phase 1 Initiate Project																					
1.1	Finalize scope and schedule																				
1.2	Identify level "1" interviews																				
1.3	Schedule onsite																				
1.3.a	Draft interview schedule																				
1.4	Level "1" interviews																				
1.5	Review interview data																				
Phase 2 Materials & Data Collection																					
2.1	Identify entities & responsible contact(s)																				
2.2	Identify & request financial documents																				
2.3	Modify IDR for system & respondents																				
2.4	Distribute IDRs																				
2.5	Distribute call data request																				
2.6	Monitor data collection progress																				
2.7	Receive materials & data																				
2.8	Organize & catalog																				
2.9	Consultant review of materials & data																				
Phase 3 On-Site Interviews & Direct Observation																					
3.1	Identify level "2," "3," & "4" interviewees																				
3.2	Schedule onsite																				
3.2.a	Draft interview schedule																				
3.2.b	Schedule communication center visits																				
3.2.c	Schedule observation activities																				
3.3	Develop interview outcomes																				
3.4	Onsite interviews & observations																				
3.5	Organize & catalog																				
3.6	Consultant review of data																				
Phase 4 Stakeholder Input																					
4.1	Identify venues																				
4.2	Schedule meetings & distribute invitations																				
4.3	Develop stakeholder questions																				
4.4	Conduct stakeholder group(s)																				
4.5	Consultant review of data																				
Phase 5 Data Compilation, Analysis & Client Input																					
5.1	Consultant review of collective data																				
5.2	Analyze financial data																				
5.3	Analyze call demand and location data																				
5.4	Create maps for drive & response time, EOA																				
5.5	Quantify revenue for EOA																				
5.6	Follow up contact of client system members																				
Phase 6 Benchmarking & Compliance Assurance																					
6.1	Identify similar & best practice systems																				
6.2	Benchmark EMS system																				
6.3	Compliance review																				
Phase 7 Define Future State																					
7.1	Develop future states																				
Phase 8 Report Results																					
8.1	Drafting of report																				
8.2	Discussion draft																				
8.3	Client review & input																				
8.4	Drafting of final report																				
8.5	Final report delivery (Electronic Format)																				
8.6	Final report presentation																				

Note: Predicted timelines are estimates. Multiple tasks may be in progress simultaneously and tasks may be completed earlier and/or later than estimated depending on project activities and progression. *Exception* - the draft report and final report will be delivered on time.