

COAST LIFE SUPPORT DISTRICT

P.O. Box 1056, Gualala, CA 95445

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AGENDA

REGULAR MEETING OF THE BOARD OF DIRECTORS

38901 Ocean Drive, Gualala, CA 95445 – Bill Platt Training Room

>>> 4 PM, October 28th, 2019 <<<

1. Call to Order Beaty
2. Adoption of the agenda Beaty
3. Minutes Approval: September 23rd, 2019 meeting Beaty
4. Privilege of the floor Beaty
 - a. Community feedback – CPR/AED training personal experience
 - b. Point Arena Health High School Health Fair
 - c. \$1,000 donation received
5. New Business Beaty
 - a. Resolution 264: EMS Ballot Measure May 5th, 2020
 - b. Mendonoma Health Alliance (MHA) revised Memorandum of Understanding (MOU)
6. Old Business Beaty
 - a. Board Goals Update
 - b. DA Succession planning
 - c. Resolution 263, Adoption of the Final Budget FY2020
7. Reports:
 - a. RCMS update Beaty
 - b. Ballot Measure Analysis workgroup Beaty
 - c. Finance: YTD Paterson/Beaty
 - i. Ambulance revenue – Wittman YTD
 - ii. Expenses
 - iii. Investment account
 - d. Communication Committee Bower/André
 - i. DA Succession planning documents
 - ii. Communication strategy for Ballot Measure
 - iii. Gualala Downtown Streetscape update
 - e. MHA update Tittle
8. DA / Ops report Caley
 - a. Ambulance run data, with new 2nd-Out program data
 - b. DA / Ops Summary Report – read in advance and will have Q & A
 - c. RCMS Townhall: Oct 29th, 6 PM, Gualala Community Center
9. NEXT MEETINGS: Scheduled Board of Director meetings are held routinely on the 4th Monday of the month at 4:00 PM at the CLSD Bill Platt Training Center unless otherwise noted. Upcoming meetings are:

Nov 25th, 2019

Dec 23rd, 2019 – Rescheduled to Wed, Dec 18th at 4 PM due to the Christmas Holiday

Jan 27th, 2020

10. Adjourn



MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS September 23rd, 2019 Meeting

Call to Order: President Beaty called the meeting to order at 4:00 p.m. at the Bill Platt Training Room.

Present were Directors: Bower, Paterson, Schwartz, André, Tittle. Also present: District Administrator (DA) David Caley, Ops Manager Evan Dilks, Bookkeeper Clara Frost, community member Mr. Bower and Michael Tilles.

Adoption of the Agenda: Director Schwartz moved to adopt the agenda and seconded by Director André. All ayes.

Approval of Minutes: Board of Directors meeting minutes August 26th, 2019: Director André moved to approve the minutes seconded by Director Schwartz. All ayes.

Privilege of the Floor –

- a. Community feedback- CPR/AED training provided to 80 gardeners over a week long period at Posh Squash on The Sea Ranch. The group wanted to express their gratitude to Goldie Pounds (CLSD CPR/AED, Community Events Coordinator) for her effort – especially considering she donated her time to teach all the gardeners.
- b. BOD action on above: Director André moved seconded by Director Schwartz to send a card with a \$50 gift certificate to Goldie Pounds.
- c. Mr. Bower provided an update on the Gualala streetscape planning and invited and encouraged opinions from CLSD regarding driveable curbs for rescue vehicles to navigate and maneuver ambulances as safely and quickly through the downtown area. He also asked for help with the GPD zoning and suggested CLSD advocate for expanded parking between CLSD and downtown and to become more involved in the GMAC meetings. Director Bower indicated she will be the channel of communication to keep the Board updated on meeting schedules and request advocacy when appropriate.

New Business: Appointment of new Board Director: Director Schwartz moved to appoint Michael Tilles to the BOD to fill the vacancy left by Director Villagomez, the motion was seconded by Director Tittle. All ayes. Director Tilles was then sworn in by President Beaty, welcomed to the board, and was then seated to participate in the remainder of the meeting.

Old Business:

- a. Board Goals Update - The revised FY20 Board Goals were circulated with the intention that subcommittees will fill it in with action plan items and due dates. Directors further volunteered to participate in the work to accomplish several of the goals.
- b. DA Succession planning timeline as proposed by Rich Hughes was reviewed and agreed the identified milestones as reasonable. : (DA Bulletin previously distributed).

Reports:

a. Finance: YTD

- i. Ambulance Revenue – Wittman YTD: Payments for the last 2 months have been higher than projected at ~\$70,000 (July) and \$67,000 (Aug) respectively. The A/R balance is \$464,503.
- ii. Expenses – as expected and within budget.
- iii. Investment account: The first Treasury bill has been renewed for another six months due to securing the best interest rate – slightly lower than expected. The next Treasury bill is due for renewal in Nov.

b. Communications Committee:

- i. Ongoing work being done in the area of CLSD branding and background work to support the potential Ballot Measure Analysis Workgroup.

- c. **MHA update:** Last month's discussion handout is attached to this agenda packet. All forms have been submitted to HRSA to transfer the remaining funds from RCMS to MHA as the new Fiscal Agent now that

it has become a 501(c)3.

- d. Ballot Measure Analysis workgroup: The DA is working with County Counsel to write a new ballot measure modeled from the last EMS measure in 2012. A draft will be presented in the Oct or Nov BOD meeting.

DA / Ops report:

- a. Ambulance Run data with new 2nd out paramedic program data: Transport volume not as high as last year for 2 months but this does not yet create a trend.
- b. DA Summary Report – Reviewed ahead and Q and A provided as necessary.
- c. Update efforts on increasing EMS revenues:
- d. RCMS update.
- e. The EMR course was cancelled due to low registration despite aggressive advertising, posting on social media and websites, etc.
- f. We did not apply to participate in the pilot Medicare program: ET3 (Emergency Triage, Treat and Transport). In order to be eligible, RCMS Urgent Care would have to be linked via Telehealth during the hours they are closed.
- g. There are two different Matter of Balance classes being taught between now and Dec. One in Gualala and one in Manchester.

Next Board of Directors Meeting: the 4th Monday of the month at 4 PM

- Monday, October 28th at 4 pm
- Monday, November 25th at 4 pm
- December: Due to the holidays, will be moved to Wed Dec 18th at 4 pm.

Adjournment: at 6:12 Director Schwartz motioned to adjourn and seconded by Director Beaty, all ayes.

Minutes Approved:

_____(Date)_____

COAST LIFE SUPPORT DISTRICT

NOTICE OF PUBLIC HEARING OF THE BOARD OF DIRECTORS OF THE COAST LIFE SUPPORT DISTRICT ON NOVEMBER [REDACTED], 2019, AT [REDACTED] TO CONSIDER A RESOLUTION CALLING AN ELECTION ON AN ORDINANCE IMPOSING A SPECIAL TAX FOR AMBULANCE, LIFE SUPPORT AND TRANSPORT PURPOSES AND FOR OTHER OPERATING EXPENSES OF THE DISTRICT SUBJECT TO APPROVAL BY TWO-THIRDS OF THE VOTERS IN THE DISTRICT, RAISING THE DISTRICT'S SPENDING LIMIT TO ALLOW USE OF THE PROCEEDS OF THE TAX, AND REPEALING THE EXISTING AMBULANCE TRANSPORT SPECIAL TAX

NOTICE IS HEREBY GIVEN that the Board of Directors of the Coast Life Support will hold a public hearing on November [REDACTED], 2019 at [REDACTED] in its meeting room at Coast Life Support District headquarters (38901 Ocean Dr., Gualala, CA) to consider an ordinance imposing a special tax on behalf of the District, raising the District's spending limit to allow use of the proceeds of the tax, and repealing the District's existing special tax.

The tax would be imposed for the purpose of continuing furnishing, operation and maintenance of emergency medical services, ambulance, life support and transport equipment and services.

The tax would be imposed under the authority of Government Code section 50077 and is based on the use or the right of use of each Assessor's parcel within the boundaries of the District. Approval of the special tax would increase the existing tax limit from \$44 per unit of benefit to \$61 per unit of benefit. To determine the amount owed on each parcel, property within the District is classified by use, according to the following schedule: Undeveloped agricultural, timber, pasture, or waste land, 0 units; Vacant Buildable Lot, commercial or agricultural land, 1 unit; Single Family Dwelling, 3 units; Farm with residence or rural properties with multiple buildings, 4 units; Duplex, 6 units; Other Multi-family Dwellings, including trailer parks, 8 units; Institutions, utilities, parks, schools, churches, hospitals and rest homes, 8 units; Service stations, stores, enterprises, commercial, industrial office buildings, 10 units; Hotels, motels, restaurants, golf courses, theaters, 20 units. Imposition of this tax will increase the District's annual tax revenue for emergency medical services such as ambulance, life support and transport purposes from \$44 per unit of benefit to \$61 per unit of benefit. The taxes will be collected by the Counties of Mendocino and Sonoma on behalf of the District in the same manner and subject to the same penalty as other property taxes collected by the Counties.

If the Board approves the resolution after the public hearing, the ordinance imposing the tax, raising the spending limit, and repealing the existing special tax will be submitted to the voters in a mailed ballot special election on May 5, 2020 and must be approved by two-thirds of the voters voting on the question.

Further information on the proposed ordinance or concerning the public hearing can be obtained from _____, Coast Life Support District, Post Office Box 1056, Gualala, CA, phone number _____.

Dated: _____ By: _____

Dated: _____

RESOLUTION OF THE BOARD OF DIRECTORS OF THE COAST LIFE SUPPORT DISTRICT CALLING AN ELECTION ON AN ORDINANCE IMPOSING A SPECIAL TAX FOR AMBULANCE, LIFE SUPPORT AND TRANSPORT PURPOSES SUBJECT TO APPROVAL BY TWO-THIRDS OF THE VOTERS IN THE DISTRICT, RAISING THE DISTRICT'S SPENDING LIMIT TO ALLOW USE OF PROCEEDS OF THE TAX, AND REPEALING THE EXISTING SPECIAL TAX, AND ORDERING A SPECIAL ELECTION IN MAY 2020

WHEREAS, the Board of Directors of the Coast Life Support District wishes to propose an ordinance authorizing a special tax to be voted upon by the voters of the District for ambulance, life support and transport purposes to replace the existing special tax, and to raise the District's spending limit to allow use of the proceeds of the tax; and

WHEREAS, state law requires that proposed special taxes be submitted to the voters for their approval, and authorizes Districts to call a special election on May 5, 2020 for this purpose conducted wholly by mail pursuant to Elections Code sections 1500 and 4000; and

WHEREAS, state law further requires that the proposed tax be approved by two-thirds of the District's Board members following a noticed, public hearing.

NOW, THEREFORE, BE IT RESOLVED:

- (1) The Board finds and declares that the District has complied with all laws requiring notice of this action and has held a public hearing as required by law.
- (2) An ordinance authorizing a special tax shall be presented to the voters of the District, which ordinance shall be worded as follows:

AN ORDINANCE OF THE COAST LIFE SUPPORT DISTRICT IMPOSING A SPECIAL TAX FOR AMBULANCE, LIFE SUPPORT AND TRANSPORT PURPOSES, RAISING THE DISTRICT'S SPENDING LIMIT TO ALLOW USE OF PROCEEDS OF THE TAX, AND REPEALING THE EXISTING SPECIAL TAX

SECTION 1. PURPOSE AND INTENT

It is the purpose of this Ordinance to authorize the levy of a special tax on parcels of real property that are within the Coast Life Support District, established by Chapter 375, Statutes of 1986, in order to augment funding for furnishing, operating and maintaining emergency medical services, ambulance, life support, and transport equipment and services.

This is a special tax within the meaning of Section 4 of Article XIII A of the California Constitution, and is being enacted pursuant to the authority and procedures of Chapter 375,

Statutes of 1986 and Government Code section 50077. This tax is based on the use or the right of use of each Assessor's parcel; and is based, to the extent practical, upon the costs of providing ambulance and life support and transportation services associated with each parcel, its use and the improvements thereon. Since this tax is not an ad valorem tax, the exemptions contained in or authorized by Article XIII of the California Constitution shall not apply.

The taxes imposed by this Ordinance may be collected by the Counties of Mendocino and Sonoma ("Counties") on behalf of the District in the same manner and subject to the same penalty as other charges and taxes fixed and collected by the Counties.

The revenues raised by this tax shall be placed in a separate account and are to be used solely for the purposes of obtaining, furnishing, operating and maintaining emergency medical services, ambulance, life support and transport equipment or apparatus and services, and for other necessary operating expenses of the District, consistent with Section 40 of Chapter 375, Statutes of 1986 (Coast Life Support District Act).

SECTION II. SPECIAL TAX

The District's Board of Directors is authorized to levy a special tax within the boundaries of the Coast Life Support District each year, for the purposes stated in Section I, on each parcel of land shown on the respective County Assessor's parcel maps and carried on the County secured property tax rolls; provided, however, that such a special tax shall not be imposed upon a federal or state governmental agency or another local agency. This special tax shall be imposed in accordance with the following schedule.

The following are the special tax rates for the Coast Life Support District:

<u>Actual Land Use</u>	<u>Units of Benefit</u>
Undeveloped agricultural, timber, pasture, or waste land	0
Vacant Buildable Lot, commercial or agricultural	1
Single Family Dwelling	3
Farm with residence or rural properties with multiple buildings	4
Duplex	6
Other Multi-family Dwellings including trailer parks	8
Institutions, utilities, parks, schools, churches, hospitals and rest homes	8
Service stations, stores, enterprises, commercial, industrial office buildings	10
Hotels, motels, restaurants, golf courses, theaters	20

SECTION III. SPECIAL TAX LIMIT

The special tax authorized by this Ordinance shall not exceed \$61 per unit of benefit per year.

SECTION IV. REPORT AND HEARING

Each year prior to the imposition of said tax, the District's Board of Directors shall cause a report to be prepared showing each parcel, the owner(s) thereof, and the proposed levy thereon. The report shall also contain a summary by the District's chief fiscal officer stating the amount of funds collected and expended in the prior fiscal year, and the status of any project required or authorized to be funded by the tax. Upon the receipt of such report, the Board of Directors shall set a date for a hearing thereof and shall cause notice of such hearing to be posted at three (3) public places within the District, or, in lieu of posting, by mailing notice of hearing to each property owner at the address disclosed on the latest tax roll. At said hearing, the Board of Directors shall make such corrections to the taxes proposed to be levied as may be required to conform to the schedule as set forth above.

SECTION V. COLLECTION

The tax shall be collected in the same manner and subject to the same penalty as other property taxes collected by the Counties.

SECTION VI. APPROPRIATIONS LIMIT

The appropriations limit for the District shall be increased by the amount of the tax money raised by imposition of this tax, for the maximum period permitted by law (four years).

SECTION VII. REPEAL OF EXISTING SPECIAL TAX

Upon the approval of this ordinance by two-thirds of the voters voting on this question, the existing special tax, limited to \$44 per unit of benefit per year, shall be repealed.

SECTION VIII. SEVERABILITY CLAUSE

If any section, subsection, sentence, phrase or clause of this Ordinance is for any reason held to be invalid, such decision shall not affect the validity of the remaining portions of this Ordinance. The Directors of the District hereby declare that they would have adopted the Ordinance and each section thereof despite the fact that any one or more sections, subsections, phrases or clauses be declared invalid.

SECTION IX. EFFECTIVE DATE

This Ordinance shall take effect immediately upon its confirmation by two-thirds of the voters in the District voting in and election to be held on May 5, 2020.

- (3) The Board hereby calls a special election for Tuesday, May 5, 2020, and directs that the foregoing proposition shall be submitted to a vote of the qualified electors of the District at that election, in the following manner:

- a. There shall be included on the ballot to be marked by all qualified electors of the District, in addition to any other matters required by law, ballot language in substantially the following form:

“Shall the Coast Life Support District establish a special tax not to exceed \$61 per unit of benefit for emergency medical services and operating expenses of the District as set forth in the ordinance, providing \$1,180,350 annually; raise the appropriations limit of the District to permit spending of the revenue raised by the tax; and (3) repeal the existing tax of \$44 per unit of benefit?” ☐ Yes ☐ No

- b. The ballot to be used at said election shall be both as to form and matter contained therein such as may be required by law.
- c. The County Clerk of both Counties are hereby authorized, instructed and directed to provide and furnish any all official ballots, notices, printed matter, and all supplies, equipment and paraphernalia that may be necessary to properly and lawfully conduct a mail in ballot election pursuant to Election Code section 1500 and 4000.
- d. Notices of mail in ballot election, together with any other notices required by law, shall be given by the County Clerks.
- e. Arguments for and against the measure, and other analyses provided for by law, may be submitted in accordance with law.
- f. A special mail in ballot election is hereby ordered on May 5, 2020 pursuant to Election Code sections 1500 and 4000.
- g. The Clerk of the Board is directed to forward a certified copy of this resolution to the Mendocino County Board of Supervisors, the Mendocino County Clerk, the Mendocino County Registrar of Voters, the Sonoma County Board of Supervisors, the Sonoma County Clerk and the Sonoma County Registrar of Voters.

AYES____ NOES____ ABSENT____ ABSTAIN____ (2/3 vote required)

SO ORDERED.

Revised MOU: Summary of Changes
2020-2023 MHA Rural Health Network Development Grant

The purpose of this document is to outline the changes made to the Memorandum of Understanding for the 2020-2023 MHA Rural Health Network Development Grant compared to the original document signed by each founding partner organization for the 2017-2020 RHND Grant.

1. The original MOU was drafted before grant funds were awarded to RCMS for the development of a Rural Health Network. Since the original MOU, MHA has built infrastructure to take on the role of lead applicant for future RHND grants. Now that MHA is its own entity, the MOU needs to reflect MHA's participation in the Network and differentiate the MHA Rural Health Network as a whole. The MHA Rural Health Network is now comprised of 4 organizations: CLSD, MHA, RCMS and SRMH.
2. Changes to the MOU are as follows:
 - Pg. 1, opening graph: MHA added and
 - old language from "For the Establishment of the Mendonoma Health Alliance as a vertical medical network, to Consult..." to "For the purpose of renewing the agreement of the Mendonoma Health Alliance Rural Health Network, which acts as a vertical medical network to consult..."
 - MHA and a description of the organization was added under "WHEREAS:"
 - MHA added to each bullet point where all partners are referenced.
 - The previous #9 was removed because the statement does not fit into the bylaws approved by MHA board members.
"The Boards and the President SRMH shall each appoint an alternate MHA member who may vote on any matter when a regular member representing them is absent from a meeting."
 - The term "non-voting" was inserted before any reference to ex-officio member of the board, which include the MHA Executive Director, RCMS CEO, and CLSD District Administrator.

MEMORANDUM OF UNDERSTANDING

Among Mendonoma Health Alliance, Redwood Coast Medical Services, Coast Life Support District and Santa Rosa Memorial Hospital

For the purpose of renewing the agreement of the Mendonoma Health Alliance Rural Health Network, which acts as a vertical medical network to consult, collaborate and coordinate on primary care, Urgent Care and emergency medical care services in Sonoma and Mendocino Counties, including Delivery Systems and Funding Sources in order to improve local access to wellness education, prevention services and quality healthcare through creative solutions with our community.

October 9, 2019

WHEREAS:

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- MENDONOMA HEALTH ALLIANCE (hereinafter “MHA”) located in Gualala, CA, is a California Non-Profit Community-based organization. Its mission is to provide local access to wellness education, prevention services and quality healthcare through creative solutions in collaboration with the community. MHA serves as the convener for all partner organizations in its Rural Health Network. All partners in the MHA Rural Health Network provide services to the northern coastal region of Sonoma County and southern coastal region of Mendocino County (hereinafter “Service Area”). MHA also provides direct services, such as Care Transitions, Chronic Care Management coaching, non-diagnostic health screenings, and prevention education in the community and at all area schools. The MHA Board of Directors has determined that entering into this MOU will benefit the health of the residents in our Service Area and the collaboration and efficiencies between partner organizations.
 - REDWOOD COAST MEDICAL SERVICES, INC. (hereinafter “RCMS”) located in Gualala, CA is a California Non-Profit Public Benefit Corporation. Its mission is to provide high quality, family oriented, community-based primary care and urgent care from 8 a.m. to 6 p.m. weekdays, including interim stabilization and triage in emergency cases, to residents and visitors within the coastal areas in the Service Area. On-call urgent care is also provided from 8 a.m. to 6 p.m. on Saturdays, Sundays and major holidays. RCMS is an approved Federally Qualified Health Center (FQHC). Federal law requires that an FQHC “make efforts to establish and maintain collaborative relationships with other health care providers, including other health centers in the services area of the FQHC.”¹ RCMS has determined that entering into this MOU will further the collaborative efforts of RCMS to the benefit of its patients and the broader community.
 - COAST LIFE SUPPORT DISTRICT (hereinafter “CLSD”) located in Gualala, CA, is a Special District created by the California Legislature in 1986². The primary purpose of CLSD is to ensure the availability of emergency ambulance service in the Service

¹ Section 330(k)(3)(B) of the Public Health Services Act.

² Chapter 375 of the uncodified CA statutes of 1986, as amended by Chapter 7 of the uncodified statutes of 1988 and Chapter 103 of the uncodified CA statutes of 2011.

Area. The primary ingress and egress to the area is California Highway 1, a two-lane windy road isolated by sheer cliffs and mountainous hills. The nearest 24-hour emergency medical care is 1.5 to 2 hours by vehicle. Because of the unusually long transport times, CLSD paramedics routinely provide stabilization and in-transport care that is more comprehensive than their urban counterparts. Helicopter ambulance service is not provided by CLSD but by a private company when weather permits. Frequently, helicopter access is not possible, which increases the burden on CLSD's ambulance crews and the community's medical isolation.

- SANTA ROSA MEMORIAL HOSPITAL (hereinafter "SRMH") located in Santa Rosa, CA, is part of the St. Joseph's Health System and is licensed by the State of California as a 278-bed general acute care hospital. SRMH provides a comprehensive network of specialty care and the provision of comprehensive services through a wide variety of affiliated healthcare providers. The hospital is home to the region's Level II Trauma Center. SRMH provides emergency and inpatient care to residents of the Service Area who are transported to it by ground or air ambulance. SRMH treats and average of 1,450 patients annually who have experienced a serious or life-threatening injury.
- MHA, RCMS, CLSD and SRMH foresee that joint consultation, collaboration and coordination regarding the services they provide to residents of the Service Area could benefit each of them and the populations they serve by increasing the likelihood there are no "gaps in care" for each patient from initiation of care until care is no longer needed.
- MHA, RCMS, CLSD and SRMH also understand that there may be many state and federal funding sources available for advancing the purpose of this MOU and agree to further investigate the feasibility and benefits of applying for all such funds.

THEREFORE:

1. MHA, RCMS, CLSD and SRMH (the parties) do hereby support the ongoing development and operation of the MHA Rural Health Network. MHA is and will continue to be governed by a Board of Directors that is comprised of two members from the RCMS and CLSD Board of Directors and two members of the executive staff of SRMH appointed by the President, or their designees, and three community representatives selected by the above members/designees, for a total of nine (9) voting members. The selection of the community members shall occur during public meetings. Additional non-voting members from Community Service Organizations ("CSO") may be appointed if deemed appropriate by the MHA Board of Directors. In any case, no CSO shall have more than one non-voting member.
2. RCMS and CLSD further each do hereby agree that upon approval of this MOU, the MOU between RCMS and CLSD, approved as Resolution No. 223-B by the CLSD Board on the 19th of June, 2014, is superseded and shall be no longer of any force or effect.

FURTHERMORE:

MHA, RCMS, CLSD and SRMH each do hereby agree:

3. This MOU does not modify the provision of any service(s) being provided by MHA, RCMS, CLSD and/or SRMH, whether such service(s) are provided separately or jointly by any one or more of them, including and inpatient services by SRMH. If as a result of the consultation, collaboration and/or coordination carried out under this MOU, the parties agree that a new service is to be provided by MHA, SRMH, CLSD, and/or RCMS a new and separate written agreement containing mutually acceptable terms and conditions shall be entered into.
4. MHA shall advise the CEO of RCMS, the District Administrator for CLSD and the President of SRMH on the coordination and integration of the delivery of primary care, specialty care, urgent care, preventative health care, emergency medical services and wellness education to residents of the Service Area between and among their various facilities and systems, including recommendations for new delivery systems, funding sources and population based strategies.
5. The MHA Rural Health Network is operating as a result of the planning activities under the federal grant entitled “Rural Health Network Development Planning Grant Program” issued on 5/20/2016 to RCMS, and as a vertical health care network focused on establishing an infrastructure to expand access, coordinate, and improve the quality of health care services for residents of the Service Area.
6. MHA may consult with the RCMS Medical Director, and other appropriate staff of RCMS, CLSD or SRMH on the medical personnel necessary to provide urgent care services, and whether it is more advisable to engage that personnel directly as employees or by contract. MHA may also consult with the President of SRMH and other appropriate staff of RCMS, CLSD or SRMH on the medical personnel necessary to provide emergency medical services, and whether it is more advisable to engage that personnel directly as employees, or by contract.
7. Each party shall bear its own costs of participation in the MHA Rural Health Network. No Part of this MOU requires, or shall be construed as requiring, one party to contribute any funds to any expenses of, or pay any compensation to or on behalf of any other party. The parties further acknowledge and agree that the MHA Rural Health Network shall not have any authority to incur debt, or any other legal obligations, on behalf of RCMS, CLSD or SRMH.
8. When requested as deemed necessary by the MHA Rural Health Network, but no more frequently than bi-annually on a calendar basis, RCMS, CLSD and SRMH shall provide MHA with reports regarding the numbers and types of patient visits, and other information relating directly to the delivery of services to residents of the Service Area. MHA shall also be provided on a quarterly calendar basis, any surveys of patient satisfaction carried out by RCMS, CLSD or SRMH regarding services provided to residents of the Service Area.
9. The Executive Director of MHA, the CEO of RCMS, and the District Administrator for CLSD shall serve as non-voting ex-officio members of the MHA Board of Directors. Non-voting ex-officio members shall be responsible for supporting the

Rural Health Network by producing reports required by this MOU, and needed staff work, upon reasonable request.

10. In addition to the non-voting ex-officio members, MHA may request that other CLSD, RCMS and/or SRMH staff attend the MHA meetings as needed.
11. Decision-making and functions of the Board of Directors of the MHA Rural Health Network must follow the requirements of the Bylaws.
12. The members of the MHA Rural Health Network shall use ordinary care and reasonable diligence in the exercise of their powers and in performance of their duties pursuant to this MOU. No current or former member of MHA will be responsible for any act or omission by another member.
13. No party shall have an obligation to provide information or reports to the MHA that it determines to be unrelated to the purposes of this MOU, that contain its trade secrets or would place it at a competitive disadvantage or that it otherwise determines is unreasonable, which unreasonableness shall be articulated to the MHA.
14. MHA members and CLSD, RCMS and SRMH personnel who provide staffing or other services to the MHA, shall respect each party's and each patient's privacy rights and all Health Insurance Portability And Accountability Act (Public Law 104-191) (HIPAA) requirements. This includes but is not limited to medical, business and personnel information. All MHA members, staff and those who sit on MHA committees, or any person who attends an MHA meeting shall sign initially, and on no less than an annual basis, a confidentiality statement that meets HIPAA requirements.
15. This MOU may be terminated by any party on 60 days written notice to the other parties, or at any time upon the mutual agreement of all of the parties, as expressed in a written agreement
16. This MOU may be amended only by an affirmative vote of the majority of the Boards and the President SRMH.

SIGNED BY:

Micheline White, Executive Director of Mendonoma Health Alliance, who affirms the MHA Board of Directors approved this MOU on _____, 2019.

David Caley, District Administrator of Coast Life Support District, who affirms the CLSD Board of Directors approved this MOU on _____, 2019.

Doric Jemison-Ball, CEO of RCMS, who affirms the RCMS Board of Directors approved this MOU on _____, 2019.

Todd Salnas, President of Santa Rosa Memorial Hospital, on _____, 2019, who affirms he is legally authorized to bind Santa Rosa Memorial Hospital to the terms of this MOU.

COAST LIFE SUPPORT DISTRICT

RESOLUTION No: 263 ADOPTION OF FINAL BUDGET FOR FISCAL YEAR 2020

WHEREAS, Coast Life Support District Board of Directors, Finance Committee and Staff have reviewed the current financial position for the past year, and

WHEREAS, the District has a need to maximize its revenues, including maintaining the benefit assessment special tax rates as approved by the voters for Emergency Medical Services, and

WHEREAS, the District has reviewed the Ambulance billing charges, in order to maximize revenue while maintaining rates consistent with medical cost inflation,

WHEREAS, the District will require the full assessment as authorized for Urgent Care services in order to fully fund the current program and provide adequate funds for development of the presently envisioned Urgent Care program and any other authorized use, and

WHEREAS, Reserve funding should remain at present levels to support contingencies and capital replacement requirements, and

WHEREAS, Coast Life Support District anticipates Revenues of the following:

Sonoma County	\$ 795,296
Mendocino County	\$ 1,018,164
Ambulance Billings	\$ 650,000
Miscellaneous	<u>\$ 300,634</u>
Total Budgeted Revenue	\$ 2,764,094

WHEREAS, the following Expenditures will provide the resources necessary to meet the established objectives for the next Fiscal Year:

Ambulance Operations	\$ 1,625,596
Administration & Overhead	215,925
Urgent Care Program	825,315
Interest & Depreciation	95,664
Reserve Fund Decrease	<u>1,594</u>
Total Budgeted Expenditures	\$ 2,764,094

BE IT RESOLVED that the Board of Directors authorize its Officers, Administrator and Staff to make expenditures necessary to operate the Ambulance service and all Authorized programs,

BE IT FURTHER RESOLVED that the Board of Directors authorized the above amounts for the Coast Life Support District's Budget for Fiscal Year 2020.

The above resolution was introduced by Director Schwartz, who moved its adoption, seconded by Director Beaty, and passed and adopted on this 28th day of October, 2019 by the following roll call vote:

Directors:	André	Aye	No	Abstain	Absent
	Beaty	Aye	No	Abstain	Absent
	Bower	Aye	No	Abstain	Absent
	Patterson	Aye	No	Abstain	Absent
	Schwartz	Aye	No	Abstain	Absent
	Tilles	Aye	No	Abstain	Absent
	Tittle	Aye	No	Abstain	Absent

Ayes: Noes: Abstain: Absent:

WHEREUPON, the President declared the foregoing RESOLUTION adopted and SO ORDERED.

Naomi Schwartz, Secretary

CLSD AMBULANCE REVENUE

	A	B	C	D	E	F	G	H	I	J	K	L	M
	BILLABLE INCIDENTS	CHARGES	MCARE WRITE DOWNS	MCAL WRITE DOWNS	OTHER CONTRACTUAL WRITE DOWNS	NET CHARGES	PAYMENTS	REFUNDS	NET PAYMENTS	BAD DEBT WRITE OFFS	OTHER WRITE OFFS	ADJ	NEW A/R BALANCE
FY19													
OCT '18	67	\$ 248,217	\$ 116,334	\$ 55,281	\$ 11,288	\$ 65,314	\$ 70,941	\$ -	\$ 70,941	\$ -	\$ -	\$ -	\$ 436,400
NOV '18	58	\$ 208,046	\$ 95,675	\$ 68,631	\$ 6,318	\$ 37,423	\$ 48,605	\$ -	\$ 48,605	\$ -	\$ 3	\$ 0	\$ 425,215
DEC '18	68	\$ 223,719	\$ 67,435	\$ 61,071	\$ -	\$ 95,212	\$ 48,587	\$ -	\$ 48,587	\$ -	\$ -	\$ 2,638	\$ 474,478
JAN '19	50	\$ 199,104	\$ 110,645	\$ 48,835	\$ 2,685	\$ 36,940	\$ 48,119	\$ 7,077	\$ 41,042	\$ -	\$ -	\$ 7	\$ 470,383
FEB'19	61	\$ 233,790	\$ 94,248	\$ 63,149	\$ 9,264	\$ 67,129	\$ 47,592		\$ 47,592	\$ 34,163	\$ 233	\$ -	\$ 455,524
MARCH '19	75	\$ 297,252	\$ 172,524	\$ 32,088	\$ 964	\$ 91,676	\$ 39,210		\$ 39,210	\$ 38,101	\$ 5,024	\$ -	\$ 464,867
APRIL '19	54	\$ 196,917	\$ 143,715	\$ 18,395	\$ 3,144	\$ 31,662	\$ 71,037	\$ 1,091	\$ 69,947	\$ -	\$ 250	\$ 65	\$ 426,397
MAY '19	56	\$ 215,716	\$ 74,460	\$ 50,320	\$ 967	\$ 89,969	\$ 67,379	\$ -	\$ 67,379	\$ 26,680	\$ 1,948	\$ 500	\$ 420,858
JUNE '19	69	\$ 245,187	\$ 127,965	\$ 28,276	\$ 5,326	\$ 83,620	\$ 49,795	\$ -	\$ 49,795	\$ 16,416	\$ 800	\$ 62	\$ 437,528
FY20													
JULY '19	61	\$ 225,748	\$ 62,734	\$ 2,853	\$ 7,631	\$ 152,530	\$ 71,407	\$ -	\$ 71,407	\$ -	\$ -	\$ 3,911	\$ 522,562
AUGUST '19	61	\$ 227,284	\$ 114,434	\$ 74,225	\$ 8,913	\$ 29,713	\$ 69,867	\$ -	\$ 69,867	\$ 16,067	\$ 1,837	\$ -	\$ 464,503
SEPTEMBER '19	76	\$ 277,000	\$ 75,627	\$ 47,381	\$ 6,146	\$ 147,846	\$ 48,221	\$ -	\$ 48,221	\$ -	\$ 7,930	\$ 15	\$ 556,213

<i>SEPT'18</i>	<i>52</i>	<i>\$ 194,431</i>	<i>\$ 86,754</i>	<i>\$ 53,314</i>	<i>\$ 9,730</i>	<i>\$ 44,632</i>	<i>\$ 52,021</i>	<i>\$ -</i>	<i>\$ 52,021</i>	<i>\$ -</i>	<i>\$ -</i>	<i>\$ -</i>	<i>\$ 442,027</i>
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FY To Date	198	\$ 730,032	\$ 252,795	\$ 124,459	\$ 22,690	\$ 330,088	\$ 189,495	\$ -	\$ 189,495	\$ 16,067	\$ 9,767	\$ 3,926
Last 12 Months	756	\$ 2,797,980	\$ 1,255,795	\$ 550,505	\$ 62,647	\$ 929,033	\$ 680,760	\$ 8,167	\$ 672,593	\$ 131,427	\$ 18,025	\$ 7,198

Monthly Average FY To Date	66	243,344	84,265	41,486	7,563	110,029	63,165	-	63,165	5,356	3,256	1,309
Monthly Average Last 12 Months	63	233,165	104,650	45,875	5,221	77,419	56,730	681	56,049	10,952	1,502	600

AGING							
Month	Current	31-60	61-90	91-120	121-180	180+	Balance
SEPT	\$ 168,908	\$ 59,376	\$ 68,309	\$ 62,118	\$ 51,298	\$ 146,204	\$ 556,213

CMS TRANSPORTS ON -	
TOTAL	\$ 26,981

as of SEPT' 19

Coast Life Support District

Profit & Loss Budget Overview FY19

July through September 2019

	Jul - Sep 19	Budget	\$ Over Budget	% of Budget
Ordinary Revenue/Expense				
Revenue				
4000 - CLSD Special Taxes	453,364.88	453,364.88	0.00	100.0%
4100 - Interest Revenue	0.00	2,749.97	-2,749.97	0.0%
4200 - Ambulance Revenue	324,324.44	162,499.97	161,824.47	199.6% ¹
4400 - Miscellaneous Revenue	5,296.50	12,499.97	-7,203.47	42.4%
4410 - Intergovernmental Transport(IGT)	0.00	43,882.50	-43,882.50	0.0%
4420 - Ground Emerg Med Transport	-184.60	4,500.00	-4,684.60	-4.1%
4421 - GEMT QAF Revenue	0.00	11,526.00	-11,526.00	0.0%
Total Revenue	782,801.22	691,023.29	91,777.93	113.3%
Expense				
5000 - Wages and Benefits	330,421.56	365,481.19	-35,059.63	90.4% ²
6000 - Ambulance Operations	47,057.18	40,917.75	6,139.43	115.0%
66000 - Payroll Expenses	0.00	0.00	0.00	0.0%
6700 - Overhead/Administration	45,162.19	51,350.15	-6,187.96	87.9%
6971 - IGT	0.00	0.00	0.00	0.0%
7000 - Urgent Care	206,326.78	206,328.75	-1.97	100.0%
8000 - Interest Expense	354.28	499.97	-145.69	70.9%
9000 - Other Expenses	0.00	0.00	0.00	0.0%
9500 - Depreciation Expense	23,416.03	23,416.03	0.00	100.0%
9999 - Prior Period Adjustment	0.00	0.00	0.00	0.0%
Total Expense	652,738.02	687,993.84	-35,255.82	94.9%
Net Ordinary Operating Surplus	130,063.20	3,029.45	127,033.75	4,293.3%
Other Revenue/Expense				
Other Expense	553.96	0.00	553.96	100.0%
Net Other Revenue	-553.96	0.00	-553.96	100.0%
Net Revenue	129,509.24	3,029.45	126,479.79 ³	4,275.0%

- NET BILLING: *Ref Wittman YTD Report (acc 4220 + Column F minus H/K/L)
NET CHARGES *Ref Wittman YTD Report (Column F): July & Sept are higher than anticipated. Contributing factors include lower contractual write-downs, HMO's paying the add-on amounts (as well as DHCS) on accounts from 07/01/2018 forward-then finally catching up (Sept or Oct). Creating account 4200 Amb. Rev to be higher than Budget at this time.
- Ambulance Op Wages show an decrease at this time due to when payperiods hit the P&L. Budgeted number split evenly over 12 months.
- NET REVENUE: \$129,509.24 is higher than anticipated budget (See comment #1. regarding how NET CHARGES on the Wittman YTD Report are higher in July & Sept due to several factors).As the HMO's & DHCS catch up on payments (over next month) anticipate NET REVENUE to level out.

Coast Life Support District

Profit & Loss Budget Overview FY19

July through September 2019

	Jul - Sep 19	Budget	\$ Over Budget	% of Budget
Ordinary Revenue/Expense				
Income				
4000 - CLSD Special Taxes				
4001 - Mendocino County Taxes				
4004 - Mendocino Ambulance Tax	119,415.94	119,415.94	0.00	100.0%
4009 - Mendocino Urgent Care Tax	108,687.47	108,687.47	0.00	100.0%
4010 - Mendocino Ad Valorem Tax	26,437.50	26,437.50	0.00	100.0%
Total 4001 - Mendocino County Taxes	254,540.91	254,540.91	0.00	100.0%
4002 - Sonoma County Taxes				
4024 - Sonoma Ambulance Tax	93,786.00	93,786.00	0.00	100.0%
4029 - Sonoma Urgent Care Tax	98,013.00	98,013.00	0.00	100.0%
4030 - Sonoma County Special Tax	7,024.97	7,024.97	0.00	100.0%
Total 4002 - Sonoma County Taxes	198,823.97	198,823.97	0.00	100.0%
Total 4000 - CLSD Special Taxes	453,364.88	453,364.88	0.00	100.0%
4100 - Interest Revenue	0.00	2,749.97	-2,749.97	0.0%
4200 - Ambulance Revenue	324,324.44	162,499.97	161,824.47	199.6% ¹
4400 - Miscellaneous Revenue	5,296.50	12,499.97	-7,203.47	42.4%
4410 - Intergovernmental Transport(IGT)	0.00	43,882.50	-43,882.50	0.0%
4420 - Ground Emerg Med Transport	-184.60	4,500.00	-4,684.60	-4.1%
4421 - GEMT QAF Revenue	0.00	11,526.00	-11,526.00	0.0%
Total Revenue	782,801.22	691,023.29	91,777.93	113.3%
Expense				
5000 - Wages and Benefits				
5200 - Health Insurance	28,452.82	33,000.00	-4,547.18	86.2%
5300 - Payroll Taxes Emplr Costs	7,362.80	9,896.53	-2,533.73	74.4%
5350 - PERS Employer Costs	37,380.23	39,559.97	-2,179.74	94.5%
5405 - Administration Salaries				
5405.1 - Admin Salaries-Alloc/UC	-6,328.78	-6,328.78	0.00	100.0%
5405 - Administration Salaries - Other	66,942.46	64,257.75	2,684.71	104.2%
Total 5405 - Administration Salaries	60,613.68	57,928.97	2,684.71	104.6%
5410 - Ambulance Operations Wages	178,336.61	200,302.97	-21,966.36	89.0% ²
5430 - Extra Duty/Stipend Pay/DA	9,381.91	11,149.03	-1,767.12	84.2%
5500 - Work Comp Insurance	8,893.51	13,643.72	-4,750.21	65.2%
Total 5000 - Wages and Benefits	330,421.56	365,481.19	-35,059.63	90.4%
6000 - Ambulance Operations				
6030 - Med. Director Fee-non AHUC	9,450.00	9,450.00	0.00	100.0%
6040 - Dispatch Services	7,786.62	5,467.78	2,318.84	142.4%
6050 - Misc Reimbursements	0.00	0.00	0.00	0.0%
6100 - Station/Crew Expenses				
5100 - Uniforms & Med Tests	818.80	874.97	-56.17	93.6%
6101 - Facility Repair & Maintenance	2,525.50	1,875.00	650.50	134.7%
6102 - Facility Furniture	167.79	0.00	167.79	100.0%
6110 - Supps, Rental, Clean. etc	3,043.26	1,875.00	1,168.26	162.3%
6210 - Veh. Repair & Maintenance	5,922.69	5,625.00	297.69	105.3%
6240 - Vehicle Fuel	7,939.32	6,250.03	1,689.29	127.0%
6410 - Radios & Comm Equip				
6410.1 - ATT Tower Lease	187.50	0.00	187.50	100.0%
6410 - Radios & Comm Equip - Other	0.00	750.00	-750.00	0.0%
Total 6410 - Radios & Comm Equip	187.50	750.00	-562.50	25.0%
6510 - Medical Supplies & Equip	9,215.70	7,500.00	1,715.70	122.9%
Total 6100 - Station/Crew Expenses	29,820.56	24,750.00	5,070.56	120.5%
6980 - Misc. Employee Train. Exps	0.00	1,249.97	-1,249.97	0.0%
Total 6000 - Ambulance Operations	47,057.18	40,917.75	6,139.43	115.0%

Coast Life Support District

Profit & Loss Budget Overview FY19

July through September 2019

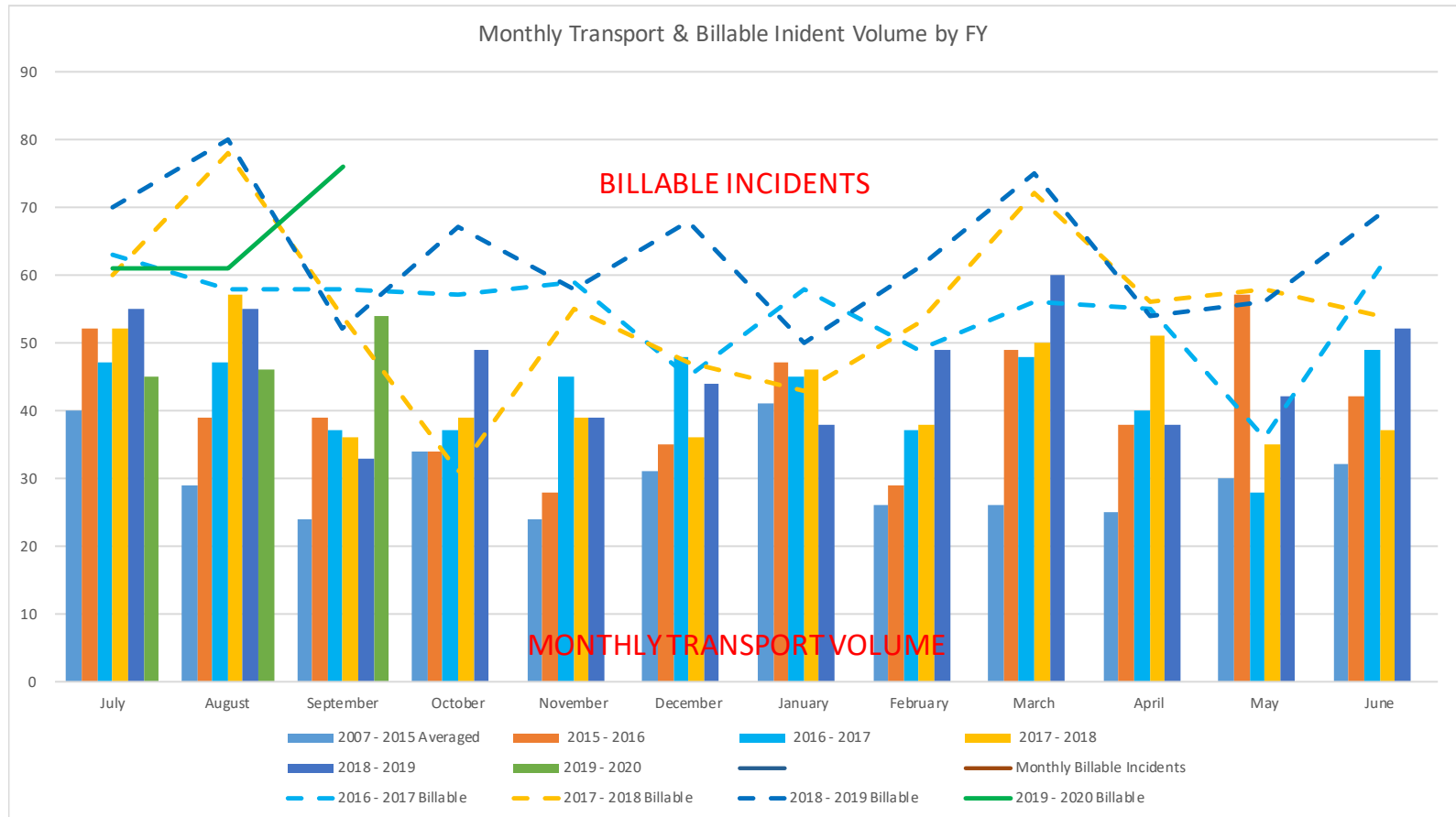
	Jul - Sep 19	Budget	\$ Over Budget	% of Budget
66000 · Payroll Expenses	0.00	0.00	0.00	0.0%
6700 · Overhead/Administration				
6180 · Utilities	3,217.46	3,250.03	-32.57	99.0%
6188 · Telephone	1,631.04	1,624.97	6.07	100.4%
6300 · Insurance	4,334.76	4,324.97	9.79	100.2%
6713 · Ambulance Billing	11,464.16	9,750.00	1,714.16	117.6%
6714 · GEMT QAF Expense	3,904.18	0.00	3,904.18	100.0%
6718 · Office Supp/Equip/Software				
6718.1 · Office Supplies	1,000.41	625.03	375.38	160.1%
6718.2 · Computer Equipment	31.48	499.97	-468.49	6.3%
6718.3 · Software	843.46	750.00	93.46	112.5%
6718 · Office Supp/Equip/Software - Other	0.00	0.00	0.00	0.0%
Total 6718 · Office Supp/Equip/Software	1,875.35	1,875.00	0.35	100.0%
6720 · Board Expenses	735.75	625.03	110.72	117.7%
6730 · Consultants				
6734 · IT	1,541.70	1,750.03	-208.33	88.1%
6735 · EMS Survey	317.85	750.00	-432.15	42.4%
6737 · Financial/Bookkeeping	0.00	750.00	-750.00	0.0%
6738 · Legal	828.00	1,249.97	-421.97	66.2%
6739 · Policy Development	0.00	1,200.00	-1,200.00	0.0%
6740 · Audit	0.00	2,275.03	-2,275.03	0.0%
6741 · Tax Administration - NBS	5,643.16	2,749.97	2,893.19	205.2%
Total 6730 · Consultants	8,330.71	10,725.00	-2,394.29	77.7%
6742 · Bank/Merchant Fees	513.12	300.00	213.12	171.0%
6755 · Property Tax Admin	0.00	4,375.03	-4,375.03	0.0%
6760 · Education/Professional Dev	11.75	250.03	-238.28	4.7%
6765 · Election Costs/Reserve	0.00	6,250.03	-6,250.03	0.0%
6770 · Dues, Subscrip, Membership	2,759.09	3,000.00	-240.91	92.0%
6788 · Printing & Reproduction	312.90	1,500.00	-1,187.10	20.9%
6795 · Travel/Transportation	308.58	1,000.03	-691.45	30.9%
6970 · Community Dev/Training	5,763.34	2,500.03	3,263.31	230.5%
Total 6700 · Overhead/Administration	45,162.19	51,350.15	-6,187.96	87.9%
6971 · IGT	0.00	0.00	0.00	0.0%
7000 · Urgent Care				
7011 · Admin Salaries-Alloc to UC	6,328.78	6,328.78	0.00	100.0%
7050 · UC Contract	199,998.00	199,999.97	-1.97	100.0%
Total 7000 · Urgent Care	206,326.78	206,328.75	-1.97	100.0%
8000 · Interest Expense				
8005 · EMS Interest Expense	0.00	0.00	0.00	0.0%
8000 · Interest Expense - Other	354.28	499.97	-145.69	70.9%
Total 8000 · Interest Expense	354.28	499.97	-145.69	70.9%
9000 · Other Expenses	0.00	0.00	0.00	0.0%
9500 · Depreciation Expense	23,416.03	23,416.03	0.00	100.0%
9999 · Prior Period Adjustment	0.00	0.00	0.00	0.0%
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Net Ordinary Operating Surplus	130,063.20	3,029.45	127,033.75	4,293.3%
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NET CHARGES *Ref Wittman YTD Report (Column F): July & Sept are higher than anticipated. Contributing factors include lower contractual write-downs, HMO's paying the add-on amounts (as well as DHCS) on accounts from 07/01/2018 forward-then finally catching up (Sept or Oct). Creating account 4200 Amb. Rev to be higher than Budget at this time.
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MONTHLY AMBULANCE DATA

Monthly Transports	July	August	September	October	November	December	January	February	March	April	May	June
2007 - 2015 Averaged	40	29	24	34	24	31	41	26	26	25	30	32
2015 - 2016	52	39	39	34	28	35	47	29	49	38	57	42
2016 - 2017	47	47	37	37	45	48	45	37	48	40	28	49
2017 - 2018	52	57	36	39	39	36	46	38	50	51	35	37
2018 - 2019	55	55	33	49	39	44	38	49	60	38	42	52
2019 - 2020	45	46	54									

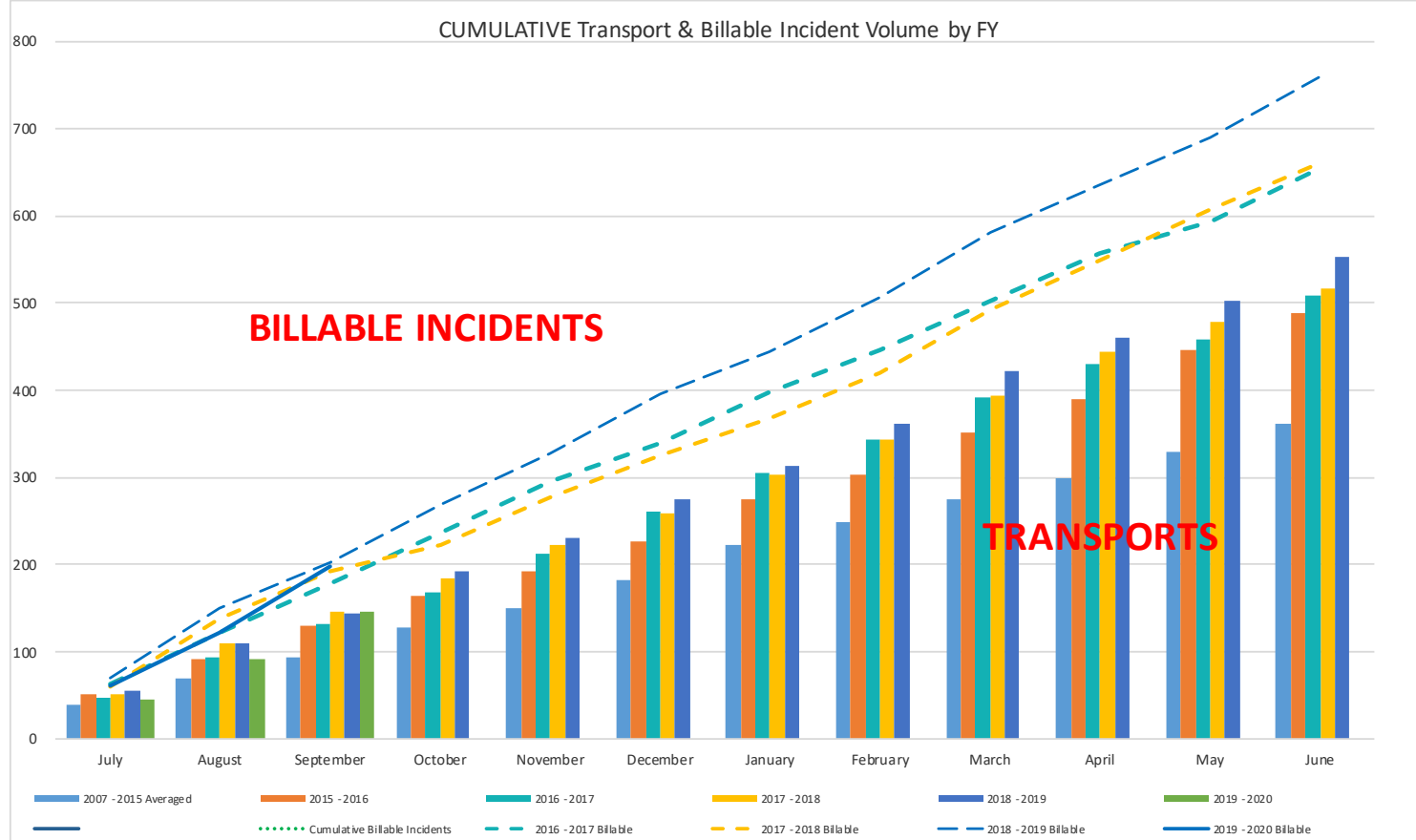
Monthly Billable Incidents	July	August	September	October	November	December	January	February	March	April	May	June
2016 - 2017 Billable	63	58	58	57	59	45	58	49	56	55	36	61
2017 - 2018 Billable	60	78	54	31	55	47	43	53	72	56	58	54
2018 - 2019 Billable	70	80	52	67	58	68	50	61	75	54	56	69
2019 - 2020 Billable	61	61	76									



CUMULATIVE AMBULANCE DATA

Cumulative Transports	July	August	September	October	November	December	January	February	March	April	May	June
2007 - 2015 Averaged	40	69	93	127	151	182	223	249	275	300	330	362
2015 - 2016	52	91	130	164	192	227	274	303	352	390	447	489
2016 - 2017	47	94	131	168	213	261	306	343	391	431	459	508
2017 - 2018	52	109	145	184	223	259	304	343	393	444	479	516
2018 - 2019	55	110	143	192	231	275	313	362	422	460	502	554
2019 - 2020	45	91	145									

Cumulative Billable Incidents	July	August	September	October	November	December	January	February	March	April	May	June
2016 - 2017 Billable	63	121	179	236	295	340	398	447	503	558	594	655
2017 - 2018 Billable	60	138	192	223	278	325	368	421	493	549	607	661
2018 - 2019 Billable	70	150	202	269	327	395	445	506	581	635	691	760
2019 - 2020 Billable	61	122	198									





M-120: 1st Out - PM + EMT = ALS
M-122: 2nd Out - PM + EMT = ALS
B-121: Back up - EMT + EMT = BLS

2nd-Out Paramedic Tracking

2019	# of Shifts M-122 Staffed	Shift	Total M122 Incidents	Dispatched	Cancelled	AMA / RAS	Transports	Billed as ALS	Billed as BLS	Total billable	Notes
MAY	29	9:00 A - 9:00 P	15	13	6	3	4	4	2	7	(2) shifts no M-122 but B-121 not dispatched
	19	9:00 P - 9:00 A		2	1	0	1	1	0		
JUN	25	9:00 A - 9:00 P	11	10	0	0	10	10	0	11	(5) shifts no M-122 due to vacations. Once Hans independent - not an issue.
	12	9:00 P - 9:00 A		1	0	0	1	1	0		
JUL	28	9:00 A - 9:00 P	18	16	3	3	9	8	2	11	(3) days 2nd Out staffed by BLS (1 AMA)
	1	9:00 P - 9:00 A		2	0	0	1	1	0		
AUG	25	9:00 A - 9:00 P	9	7	3	0	5	5	0	6	All ALS incidents
	16	9:00 P - 9:00 A		2	1	0	1	1	0		
SEP	25	9:00 A - 9:00 P	13	17	5	9	9	9	8	17	5 shifts BLS - 2 transports
	20	9:00 P - 9:00 A		0	0	0	0	0	0		
OCT		9:00 A - 9:00 P									
		9:00 P - 9:00 A									
NOV		9:00 A - 9:00 P									
		9:00 P - 9:00 A									
DEC		9:00 A - 9:00 P									
		9:00 P - 9:00 A									
2020											
JAN		9:00 A - 9:00 P									
		9:00 P - 9:00 A									
FEB		9:00 A - 9:00 P									
		9:00 P - 9:00 A									
MAR		9:00 A - 9:00 P									
		9:00 P - 9:00 A									
APR		9:00 A - 9:00 P									
		9:00 P - 9:00 A									

CLSD RUN DATA for the PRECEEDING 12 MONTHS

ALL SHADED COLUMNS ARE PREVIOUS YEAR DATA

MONTH MOST CURRENT ON TOP	A/O		PCR		ALS		ALS>BLS		BLS		BLS>ALS		TOTAL		LANDING		DRY RUN		T&R		TO RCMS				FROM RCMS			
	AUTHORIZED ORDER DISPATCHED		PATIENT CARE RECORD		ADVANCED LIFE SUPPORT				BASIC LIFE SUPPORT				TRANSPORTS				CANCELLED ON ROUTE				ALS		BLS		ALS		BLS	
	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior	Current	Year Prior
19-Sep	94	74	66	54	51	30	0	2	2	3	1	1	54	33	12	6	20	18	23	17	0	1	1	0	13	8	1	1
19-Aug	85	110	61	73	41	46	1	1	5	9	0	1	45	55	11	6	22	26	13	18	1	3	0	0	13	14	3	4
19-Jul	84	105	61	70	45	47	0	3	0	8	0	1	45	55	9	5	11	26	16	15	2	4	0	0	11	7	0	5
19-Jun	87	87	67	58	47	41	0	1	4	1	0	0	52	37	6	5	20	19	16	14	2	4	0	0	9	10	3	0
19-May	87	76	58	54	41	32	1	1	1	3	0	0	42	35	5	5	19	20	14	19	4	3	0	0	10	8	0	1
19-Apr	78	108	53	79	31	49	1	1	7	13	1	3	38	51	5	8	20	27	15	17	1	7	2	0	8	10	3	8
19-Mar	108	97	79	70	49	37	1	1	13	13	3	1	60	50	8	10	27	25	17	20	7	0	0	2	10	10	8	3
19-Feb	82	63	63	53	35	31	0	2	14	7	2	2	49	38	6	6	20	7	13	14	4	2	1	1	10	4	6	4
19-Jan	71	80	47	59	27	36	4	2	11	10	0	2	38	46	4	2	17	16	9	13	2	7	1	0	5	8	7	7
18-Dec	100	67	62	53	29	28	2	1	15	8	2	0	44	36	4	5	29	17	18	11	2	5	1	2	10	5	6	3
18-Nov	89	90	54	61	31	31	3	0	7	18	1	1	39	39	4	5	20	29	16	12	1	3	1	1	5	9	1	12
18-Oct	99	81	64	54	38	23	4	2	11	16	2	0	49	39	10	4	19	21	15	15	1	2	1	1	15	2	6	9
	1064	1038	735	738	465	431	17	17	90	109	12	12	555	514	84	67	244	251	185	185	27	41	8	7	119	95	44	57
	A/O		PCR		ALS		ALS>BLS		BLS		BLS>ALS		TOTAL		LZ		DRY RUN		T&R		TO RCMS				FROM RCMS			

District Administrator and Operations Manager Report October 2019

District Administrator: (less to report this month due to the DA's two-week vacation)

- The Fire Services Working Group Region 4 (Sea Ranch, Timber Cove, Annapolis and Fort Ross Fire) released their initial draft revisions to the Silver Plan outlining how revenue generated from a proposed ½ cent Fire Sales Tax Ballot Measure (proposed for March 2020) would be allocated. CLSD requested staffing to round out our 2nd-Out Paramedic Program to cover 100% of the 900 AM to 900 PM hours of the day but was excluded from the draft. I have discussed further with Chief Plakos of NSCFPD and we continue to advocate for placing an additional Paramedic in CLSD rather than the proposed CalFire station on Annapolis. Letters have been written to the FSWG to clarify and reconsider our request; as well as a letter to Supervisor Lynda Hopkins, who is on the EMS Advisory Ad Hoc committee. I have continued to remind decision makers that 75-80% of Fire dispatches are to EMS incidents. We are a like-public provider responding 100% to EMS dispatches.
- A significant amount of time is being spent on research, advocacy letters to elected officials, conversations with County Counsel, and leveraging best options for securing additional revenue to support CLSD services. Plans are in development to potentially stand up BLS121 (Basic Life Support) on-call 900 AM to 900 PM as a third ambulance pending a sudden spike in demand for services.
- I have engaged Supervisors Lynda Hopkins (So Co) and Ted Williams (Mendo Co) regarding RCMS. Further outreach to Senator Mike McGuire and Assemblyman Jim Wood forthcoming.
- AB1705 was signed into law by the Governor. This will merge existing GEMT programs and stands to significantly increase federal reimbursement (conservative consultant estimates tripling existing revenue). The law will be implemented July 1, 2021. No estimate yet when new revenues would actually be realized.
- AB651 was also signed into law by the Governor. This legislation replaces the expiring subsidies law for air ambulance. Thus the threat of reduced air ambulance services to the rural areas will not be realized.
- We continue to make slow and steady progress towards developing a local HIE (Health Information Exchange) between RCMS and CLSD. I am also facilitating RCMS obtaining EHR (Electronic Health Records) access to St. Joseph's Health System and Sutter Hospital. All efforts are for the purpose on better Continuity of Care between healthcare providers.
- GEMT (Ground Emergency Medical Transport) program is auditing FYE16 and FYE17. All documents have been submitted for both years. FYE16 has been completed. All costs reports accepted as originally submitted. We actually had 7 more transports than originally reported. FYE17 audit will be done in the next month or so. Expect similar outcomes.
- GEMT – Quality Assurance Fee (QAF) invoiced and monies wired for FY19 Q1.
- MHA Ex-Officio meeting this month focused on providing support for RCMS and prep for the Townhall on Oct 29th.

Operations Manager:

Deployment / Staffing

- ALS (M-120) staffed 100%, refer to 2nd out Paramedic tracking sheet for M-122 information.
- Ethan Pack passed his Paramedic accreditation for CVEMS. He is now a dual paramedic for CLSD and is working shifts.
- Two new EMT's Brenda Storm and Katherine Wells are on the schedule for November
- Paramedic Jeff Finck has announced he will be leaving CLSD and moving to Carolina once his house sells or expected at or close to the beginning of the year.

Facilities

- This phase of landscaping complete. Will set new goals for spring

Vehicles/Equipment

- No major issues pending

Community events / Training

- CLSD provided an ambulance and demonstration for the "all schools" Health fair at PAHS. Approximately 500 students with teachers came through the High school gym
- We did a CPR / first aid presentation for the Lions club. Enthusiastic and positive feedback provided to DA in outside setting.
- Provided stand-by ambulance for Gualala River run—no incidents