

# COAST LIFE SUPPORT DISTRICT

P.O. Box 1056, Gualala, CA 95445

Tel: (707) 884-1829 Fax: 884-9119

## AGENDA

### REGULAR MEETING OF THE BOARD OF DIRECTORS

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

>>> **WEDNESDAY JUNE 17<sup>TH</sup>, 2020 – 4 PM**<<<

#### **MEETING IS EARLY THIS MONTH TO ACCOMMODATE INTERVIEWS FOR THE DISTRICT ADMINISTRATOR RECRUITMENT.**

NOTICE: Due to COVID-19 pandemic; the Executive Order of Governor Newsom No 29-20; and mandatory Sheltering in Place orders of both Sonoma and Mendocino County Health Officers, essential Brown Act guidelines are temporarily suspended. Board meetings may be held via teleconference. Votes will require role call. The CLSD training room will remain a publicly accessible location that accommodates attendees spacing themselves at least six feet apart for social distancing. \*\*\*Facial covering is required to attend in person\*\*\*.

*To join by phone, dial +1-510-338-9438; Access code: 126-200-2686; PW: 1234*

1. Call to Order Beaty
2. Adoption of the agenda Beaty
3. Minutes Approval: Beaty
  - May 20<sup>th</sup>, 2020 Board meeting
  - May 27<sup>th</sup>, 2020 Board meeting – Closed session – refining hiring parameters for the District Administrator (DA)
  - June 8<sup>th</sup>, 2020 Board meeting – Closed session – Meeting with recruiter (DA)
4. Privilege of the floor Beaty
5. New Business Beaty
  - a. Review of revised Board Goals
  - b. Rotation of Board Directors on CLSD Billing Sub-Committee
6. Old Business Beaty/Caley
  - a. Draft: FY21 Urgent Care Budget – ACTION
  - b. Preliminary review of the CLSD FY21 Budget – ACTION
  - c. Resolution 265 – Adoption of the Preliminary FY 21 Budget – ACTION
  - d. Resolution 266 – Adoption of the FY21 Ambulance Rates – ACTION
  - e. Resolution 267 – Adoption of the FY21 Tax Rates – ACTION
  - f. Resolution 268 – Adoption of the FY21 Prop 4 Appropriations Limit – ACTION
  - g. Covid-19 implications on CLSD & District EMS/Fire Agencies - Discussion
  - h. DA Succession / Recruitment: update
7. Reports: Beaty/Caley
  - a. RCMS update Tilles/Caley
  - b. Finance: YTD Bower/André
    - i. Ambulance revenue – Wittman YTD
    - ii. Expenses
  - c. Communication Committee Tittle
  - d. MHA update
8. DA / Ops report Caley
  - a. Ambulance run data, with 2<sup>nd</sup>-Out program data
  - b. DA / Ops Summary Report – read in advance and will have Q & A
9. **NEXT MEETINGS:** Scheduled Board of Director meetings are held routinely on the 4<sup>th</sup> Monday of the month at 4:00 PM at the CLSD Bill Platt Training Center unless otherwise noted. Upcoming meetings are:  
**Jun 22<sup>nd</sup>, 2020**  
**Jul 27<sup>th</sup>, 2020**  
**Aug 24<sup>th</sup>, 2020 – consider changing date**
10. Adjourn



MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS  
4:00 PM, May 20<sup>th</sup>, 2020 Meeting

Due to the COVID 19 threat and Shelter in Place order, this meeting was held by teleconference.

**Call to Order:** President Beaty called the meeting to order at 4:15 PM at the Bill Platt Training Room. Present were Directors: Paterson, Bower, Schwartz, Tilles, Tittle and André. Also present: District Administrator (DA) David Caley, Ops Manager Evan Dilks, Bookkeeper Clara Frost, Paramedic Chris Ottolini.

**Adoption of the Agenda:** Director Bower moved to adopt the agenda as written seconded by Director André. All ayes.

**Approval of Minutes:** BOD meeting minutes May 4<sup>th</sup>, 2020 - Director André moved to approve the minutes as written and seconded by Director Schwartz. All ayes.

**Privilege of the Floor –** Measure J Advocacy group directed their remaining funds (donated) specifically for EMS Appreciation. CLSD also contributed to provide staff gift cards for EMS Appreciation Week.

**New Business:**

- a. Draft: FY21 Urgent Care Budget – Information: Ara Chakrabati presented the budget followed by Q&A.
- b. Preliminary review of the CLSD FY21 Budget – Informational
- c. Resolution 265 – Adoption of the Preliminary FY21 Budget – Informational
- d. Resolution 266 – Adoption of the FY21 Ambulance Rates – Informational
- e. Resolution 267 – Adoption of the FY21 Tax Rates – Informational
- f. Resolution 268 – Adoption of the FY21 Prop 4 Appropriations Limit – Informational
- g. Resolution 269 – Signing authority for Exchange Bank account – ACTION ITEM  
André-aye, Schwartz-aye, Tittle-aye, Bower-aye, Beaty-aye, Paterson-aye, Tilles-abstain – PASSED.
- h. Covid-19 implications on CLSD & District EMS/Fire Agencies - Discussion

**Old Business:**

- a. DA Succession/Recruitment: The window for applications has closed. The BOD scheduled a May 27<sup>th</sup> Closed Session meeting to discuss the parameters of the selection process. Previously scheduled is a June 8<sup>th</sup> Closed Session with the Recruiter to review the proposed list of candidates.

**Reports:**

- a. RCMS update: The business recovery plan continues to be challenged by the impact of Covid-19 causing a significant decrease in patient visits. They have applied for and received however, federal stimulus money through the CARES program. New Board members will be vetted at the June meeting.
- b. Finance: YTD
  - i. Ambulance Revenue – Wittman YTD: Net payments for April 2020 was \$42,094 with A/R of \$446,772. April had 46 billable incidents with 33 transports. Cumulative are 554 billable incidents with 433 transports.
  - ii. Expenses – Remain within budget. The estimate to remodel the existing two crew's bedrooms into four by adding a non-load bearing wall, and refresh the two bathrooms is estimated at \$25,000. After brief discussion, the project received unanimous approval to move forward. Especially with the passage of Measure J, we will need additional living space for crews.
- c. Communication Committee: nothing to report at this time.
- d. MHA update: See Quarterly Report in agenda packet

**DA / Ops report:**

- a. Ambulance Run data with new 2<sup>nd</sup> out paramedic program data attached to BOD packet.
- b. DA / OPS Summary Report – Q&A provided as necessary

**Next Meeting:** the 4<sup>th</sup> Monday of the month at 4 PM

- June 22<sup>nd</sup>
- July 27<sup>th</sup>
- August 24<sup>th</sup>

**Adjournment:** Director André motioned to adjourn at 6:15 PM seconded by Director Tittle. All ayes.

Minutes Approved:

\_\_\_\_\_ (Date)\_\_\_\_\_

DRAFT



## MINUTES OF THE CLOSED SESSION MEETING OF THE BOARD OF DIRECTORS

9:00 AM, May 27<sup>th</sup>, 2020 Meeting

Due to the COVID 19 threat and Shelter in Place order, this meeting was held by teleconference.  
Attendance at the CLSD headquarters is available at the Training Center with mandatory facial covering and appropriate social distancing.

**Call to Order:** President Beaty called the meeting to order at 9:03 AM via Zoom teleconference and at the Bill Platt Training Room. Present were Directors: Paterson, Bower, Schwartz, Tilles, Tittle and André. Also present: District Administrator (DA) David Caley, past Director Richard Hughes, and recruiter Phil McKenney.

**Adoption of the Agenda:** Director Schwartz moved to adopt the agenda as written seconded by Director Paterson. All ayes.

**Approval of Minutes:** No prior meeting minutes on the agenda to approve.

**Privilege of the Floor** – none.

**Closed Session:**

The BOD had a discussion to refine the hiring parameters for the recruitment of the District Administrator. They are also complicated by the pandemic. (§ 54957).

**Return from Closed Session:**

The BOD approved the final steps and gave direction to Phil McKenney moving towards the interviews and final hiring process for the recruitment of the DA.

**Next Meeting:** the 4<sup>th</sup> Monday of the month at 4 PM

**Jun 8<sup>th</sup>, 2020 – Closed Session: Meeting with Recruiter to discuss the Recommended Candidates for the District Administrator**

**Jun 22<sup>nd</sup>, 2020 – Regular Board Meeting**

**Jul 27<sup>th</sup>, 2020 – Regular Board Meeting**

**Aug 24<sup>th</sup>, 2020 – Regular Board Meeting**

**Adjournment:** Director Tittle recommended to adjourn at 10:25 AM seconded by the Director Beaty.

Minutes Approved:

(Date) \_\_\_\_\_



## MINUTES OF THE CLOSED SESSION MEETING OF THE BOARD OF DIRECTORS

4:00 PM, June 8th, 2020 Meeting

Due to the COVID 19 threat and Shelter in Place order, this meeting was held by teleconference. Attendance at the CLSD headquarters is available at the Training Center with mandatory facial covering and appropriate social distancing.

**Call to Order:** President Beaty called the meeting to order at 4:00 PM via Zoom teleconference and at the Bill Platt Training Room. Present were Directors: Paterson, Bower, Schwartz, Tilles, Tittle and André. Also present: District Administrator (DA) David Caley, past Director Richard Hughes, and recruiter Phil McKenney.

**Adoption of the Agenda:** Director Tittle moved to adopt the agenda as written seconded by Director Bower. All ayes.

**Approval of Minutes:** No prior meeting minutes on the agenda to approve.

**Privilege of the Floor** – none.

**Closed Session:**

The BOD had a discussion to review the Recommended List of Candidates for the District Administrator. (§ 54957).

**Return from Closed Session:**

The BOD approved the final steps and gave direction to Phil McKenney moving towards the interviews and final hiring process for the recruitment of the DA.

**NEXT MEETINGS:** Scheduled Board of Director meetings are held routinely on the 4<sup>th</sup> Monday of the month at 4:00 PM at the CLSD Bill Platt Training Center unless otherwise noted. Upcoming meetings are:

**Jun 17<sup>th</sup>, 2020 – Meeting moved up to third Wednesday at 4 PM to accommodate the Board Directors interviewing candidates for the District Administrator position.**

**Jul 27<sup>th</sup>, 2020 – Regular Board Meeting**

**Aug 24<sup>th</sup>, 2020 – Regular Board Meeting**

**Adjournment:** Director Tittle recommended to adjourn at 5:35 PM seconded by Director Beaty.

Minutes Approved:

(Date) \_\_\_\_\_

## 000000CLSD BOARD OF DIRECTORS FY20 GOALS

	GOALS	ACTION PLAN	DUE BY:	Status	LEAD:	COMM MBRS:
1	Pass and EMS tax to fund future CLSD services and develop an action plan for all necessary steps, including a communication plan	Complete Analysis for EMS tax		Completed 11/19	Ballot Measure Workgroup	David
		Work with County Counsel to develop language	Jan BOD Mtg	In Progress		Geoff
		Proceed if no Fire Sales Tax carve out		NA		Julie
		Form FPPC	01/20/20		Steven Lead	Rich H.
						David Bower
						Steven W.
		Develop campaign based on Fire Sales Tax	02/20/20	In Progress	Communication Committee	Julie
						Carolyn
2	Maintain and enhance all service areas through management of District finances using best practices and accounting.					David
		Continue to work with Communication Comm to update website regarding billing and customer fees.	02/20/20		Finance Committee	Annan
		FC subcommittee to research and make recommendations re bill collection. Report to Board at large re findings.	Jan FC Mtg			Geoff
		Monitor 2019 investments.	Jan BOD Mtg			Naomi
		Monitor 2nd Paramedic cost effectiveness.	Ongoing	Schwab Treasuries		David
			Ongoing	volume down due to Covid-19		Evan
						Clara
						Robin
3	Development of a succession plan for the retiring DA					Michael
		Work with DA to develop FY20/21 Budget	Q4 FY20	Prelim presented May 20th		
				Final TB presentd Jun 17th		
		Hire Recruitment Firm	01/20/20		Succession Committee	
		Update Job Bulletin	done		Leslie	
		Release Job Bulletin	done		Michael	
		Application Deadline	May 18th		Carolyn	
		Screening, Supplemental Questionnaire	5/18-6/6/20			
4	Improve effectiveness of internal and external communications through regularly scheduled outreach and communiques	Telephone interviews, Design Assessment Ctr	Early June	In Progress		
		Conduct Assessment Center	June 29th			
		Board interview of candidates	June 22 & 29			
		Reference checks --> Negotiate job offer	After June 29			
		Determine start date	TBD after 6/29			
		Ballot Measure educational materials	Done	Diverse campaign materials	Communication Committee	Carolyn
		Ongoing Community Outreach Communication materials	Done	Community Forums canceled		Julie
		Rebranding CLSD after Ballot Measure		due to Covid-19. Recorded and put on CLSD website		David
5	Maintain excellence in CLSD staff at all levels					
		TO BE DETERMINED BY COMMUNICATION COMMITTEE		Heavy use of ICO ads, Social Media, postcards and YES on Measure Advocacy Group		
		Rebranding CLSD after Ballot Measure	pushed to FY21	Budgeted in FY21		
		Board determined part of DA's job description - not a BOD Goal			District Administrator	David
6	Help sustain a long-term Urgent Care option for the District, including review of overhead allocation and future revenue needs					
		Attend and monitor RCMS FC, Board and Forums.	Ongoing	Directors & DA attend RCMS		Geoff
		Attend and participate in MHA Vision and Planning sessions.	11/19/20	BOD & FC meetings to		David
		Detailed analysis of RCMS financials UC Parcel Tax levy	05/20/20	monitor Recovery Plan		Annan
		Consider timing of Ballot Measure to support UC?	Fall 20	Covid-19 disrupting Recovery Plan. \$660K Community		
				donations. Covid-19 CARES		
				funds ~\$1.6M.		
			May-20	New Directors seated on		

## 000000CLSD BOARD OF DIRECTORS FY20 GOALS

				RCMS BOD		
7	Find ways to develop an EMS "team" infrastructure integrating the Board, full-time and part-time medical and other operational staff and supervisors focused on common goals with roles that relate each other. Continue support of and dialogue with sister EMS and fire service agencies (moved from former Goal #9)	Assure competitive salaries and benefits	Jul-20	6% Raises in FY19 & 20		Entire BOD
		Support the DA in terms of staff management	May/Jun 20	3% Raise & Supervisor pay in FY21 budget		David
		Assure CLSD readiness to meet EMS needs				
		DA keeps staff informed of BOD and FC actions and decisions	04/30/20	SAMHSA EMS Training Grant		
		Part of DA performance evaluation is monitoring staff retention		application submitted	Only resignations due to retirement	
		Board appreciation of employees at holidays and times of need	ongoing			
		Title 22: CPR/AED/First Aid Public Safety class District-wide in addition to EMR and EMT class resuming with allowed	TBD in FY21 when SIP order relaxed	Will be offered regardless of EMS Trng Grant		
8	Ensure the District is doing 5-year planning based on community needs and organizational planning	Does EMS Ballot Measure pass?	05/05/20	PASSED	Finance Committee	Annan
		Analysis of RCMS on-going financial stability?	Monitoring	Continuously (see Goal #6)	District Administrator	Geoff
		Considering the two items above, update 5-year planning doc	06/20/20	TBD - esp related to C-19		Naomi
						David
						Evan
Was #10 Now #9	Continue to collaborate locally, regionally and statewide to maximize our resources and better serve our community	Some Board members to attend annual SD conferences annually.	SD2020	consider SD Assoc. Conf.	DA	David
		Field trips by board members to other agency board meetings.	conference	Monterey 2021?	Board Members	Board Mbrs
			cancelled	also SD Assoc webinars		
		Individual outreach to local and regional agencies-good will	Ongoing			
		On-going education to expand Directors to ability to serve	(e.g. webinar)			
Was #11 Now #10	CLSD provides resource materials for optimal Emergency preparedness	Roles as a Board Member				
		Brown Act, etc.				
		Share established educational materials to empower the community to shelter in place, prepare for power outages, have emergency kits, etc.	Feb/Mar 20	CLSD Website links C-19	Communication Committee	Carolyn
			20-Mar	SIP mandated w/ C-19		Julie
			20-Mar	Mass Casualty Incident drill		David
				planned in May 2020 had to be cancelled due to C-19		Evan
			FY21	If EMS Trng Grant funded, a goal builds MCI Planning capacity each of 4 years.		

## COAST LIFE SUPPORT DISTRICT

Income	Actual FY19	Budget FY19 6% Inc	Actual FY20 10 months exceptions co taxes	Budget FY20 6% Inc final Budget	Budget FY21 3% Inc Draft Budget	FY20 vs FY21 Changes	% Change
	Actual	Budget					
4000 CLSD Special Taxes							
<b>4001 Mendocino County Taxes</b>							
4004 Mendocino Ambulance Tax	469,225	477,664	445,210	477,664	665,144	187,480	39.25%
4009 Mendocino Urgent Care Tax	328,049	337,927	405,281	434,750	434,750	-	0.00%
4010 Mendocino Special Tax	106,588	100,433	99,747	105,750	105,750	-	0.00%
Total 4001 Mendocino County Taxes	<b>903,862</b>	<b>916,024</b>	<b>950,237</b>	<b>1,018,164</b>	<b>1,205,644</b>	<b>187,480</b>	<b>18%</b>
<b>4002 Sonoma County Taxes</b>							
4024 Sonoma Ambulance Tax	374,548	375,144	358,764	375,144	515,206	140,062	37.34%
4029 Sonoma Urgent Care Tax	305,573	306,015	379,495	392,052	392,052	-	0.00%
4030 Sonoma Special Tax	-	-	21,075	28,100	28,087	(13)	-0.05%
Total 4002 Sonoma County Taxes	<b>680,122</b>	<b>681,159</b>	<b>759,335</b>	<b>795,296</b>	<b>935,345</b>	<b>140,049</b>	<b>18%</b>
<b>Total 4000 CLSD Special Taxes</b>	<b>1,583,984</b>	<b>1,597,183</b>	<b>1,709,572</b>	<b>1,813,460</b>	<b>2,140,989</b>	<b>327,529</b>	<b>18%</b>
4100 Interest Income	225	-	68	11,000	-	(11,000)	0.37%
<b>4200 Ambulance Income</b>							
4201 Ambulance Transport Billings	650,064	650,000	699,654	650,000	652,405	2,405	0.37%
4220 Writedowns - Misc						-	0.00%
4225 Writedowns - MediCar/Cal						-	0.00%
4228 Writedowns - District Resident Discount		-		-		-	0.00%
<b>Total 4201 Ambulance Transport Billings</b>	<b>650,064</b>	<b>650,000</b>	<b>699,722</b>	<b>661,000</b>	<b>652,405</b>	<b>(8,595)</b>	<b>-1.30%</b>
4400 Miscellaneous Revenue	44,393	32,550	17,185	50,000	-	(50,000)	-100.00%
4410 Intergovernmental Transport (IGT)	248,254	130,000	244,451	175,530	250,000	74,470	42.43%
4420 Ground Emerg Med Transport	18,143	25,000	(185)	18,000	20,000	2,000	11.11%
<del>4421 GEMT - SB523 (QA Fee) DELETED (HHS STIMULUS)</del>	30,029	28,000	-	46,104	-	(46,104)	-100.00%
Unapplied Cash Payment Income			-			-	
<b>Total Income</b>	<b>2,575,092</b>	<b>2,462,733.00</b>	<b>2,670,745</b>	<b>2,764,094</b>	<b>3,063,394</b>	<b>370,395</b>	<b>13.40%</b>
<b>Expenses</b>							
<b>5000 Wages and Benefits</b>							
5200 Health Insurance	103,135	120,000	115,500	132,000	156,000	24,000	18.18%
5300 Payroll Taxes Employer Costs	34,775	36,358	30,240	39,586	40,093	507	1.28%
5350 PERS Employer Costs	128,787	106,858	126,511	158,240	184,058	25,818	16.32%
5405 Administration Salaries	252,427	232,749	237,459	257,031	288,400	31,369	12.20%
5405.1 Admin Salaries-Allocate to UC	(23,988)	(23,988)	(18,986)	(25,315)	(26,154)	(839)	3.31%
5410 Ambulance Operations Wages	703,290	717,454	651,851	801,212	945,122	143,910	17.96%
5430 Extra Duty/Stipend Pay	49,122	56,208	30,646	44,596	45,796	1,200	2.69%
5460 Other Compensation	-	-	-	-	-	-	0.00%
5500 Work Comp Insurance	53,914	53,914	40,728	54,575	50,000	(4,575)	-8.38%
<b>Total 5000 Wages and Benefits</b>	<b>1,301,461</b>	<b>1,299,553</b>	<b>1,213,949</b>	<b>1,461,925</b>	<b>1,683,315</b>	<b>221,390</b>	<b>15.14%</b>
<b>6000 Ambulance Operations/ 66000 payroll exp</b>							
6030 Medical Director Fee-non AHUC	37,800	37,800	31,500	37,800	37,800	-	0.00%
6040 Dispatch Services	21,219	21,545	21,135	21,871	23,122	1,251	5.72%
6050 Misc Reimbursements	520	-	-	-	-	-	0.00%
<b>6100 Station/Crew Expenses/LIC &amp; PERMITS</b>							
6101 Facility Repair & Maintenance	10,579	9,400	4,140	7,500	7,500	-	0.00%
6102 Facility Furniture	5,882	-	287	-	-	-	0.00%
5100 Uniforms & Med Tests	3,190	5,000	4,429	3,500	7,500	4,000	114.29%
6110 Supplies, Rental, Cleaning etc	6,185	13,000	7,369	7,500	7,500	-	0.00%
6210 Vehicle Repair & Maintenance	28,391	18,000	15,682	22,500	22,500	-	0.00%
6240 Vehicle Fuel	22,076	15,000	18,318	25,000	25,000	-	0.00%
6410 Radios & Comm Equip	1,042	4,000	3,064	3,000	3,000	-	0.00%
6510 Medical Supplies & Equipment	39,307	24,000	39,819	30,000	40,000	10,000	33.33%
6511 Capital Replacement fund		-					
6980 Misc. Staff Taining & Development	2,248	6,000	1,664	5,000	7,500	2,500	50.00%
<b>Total 6000 Ambulance Operations</b>	<b>178,438</b>	<b>153,745</b>	<b>147,409</b>	<b>163,671</b>	<b>181,422</b>	<b>17,751</b>	<b>10.85%</b>
<b>6700 Overhead/Administration/ 6971 IGT EXP.</b>							
6180 Utilities	13,138	14,000	12,744	13,000	14,000	1,000	7.69%
6188 Telephone	6,167	4,475	5,124	6,500	6,500	-	0.00%
6300 Insurance	18,320	17,996	12,992	17,300	17,950	650	3.76%
6714 4420 GEMT - SB523 (QA Fee)	13,347	7,000	24,512	-	14,025	14,025	100.00%
6713 Ambulance Billing	37,041	39,000	41,188	39,000	39,000	-	0.00%
6718 Office Supp/Equip/Software	-	-	(65)			-	0.00%



6718.1 Office Supplies	2,993	5,000	2,179	2,500	3,000	500	20.00%
6718.2 Computer Equipment	2,106	3,000	2,005	2,000	5,000	3,000	150.00%
6718.3 Software	2,979	3,000	2,902	3,000	4,000	1,000	33.33%
6720 Board Expenses	1,271	2,500	1,818	2,500	25,000	22,500	900.00%
6730 Consultants						-	0.00%
6731 Administration			18,085	-	-	-	0.00%
6732 Employee Assistance Program (EAP)			-	-	2,400		
6734 IT	6,145	7,000	5,150	7,000	6,500	(500)	-7.14%
6735 EMS Survey	5,336	3,500	3,028	3,000	3,500	500	16.67%
6737 Financial/Bookkeeping	11,460	3,000	2,404	3,000	9,000	6,000	200.00%
6738 Legal	832	5,000	8,763	5,000	5,000	-	0.00%
6739 Policy Development			-	4,800	-	(4,800)	-100.00%
6740 Audit	9,100	9,100	9,400	9,100	9,500	400	4.40%
6741 Tax Administration - NBS	10,981	10,430	9,481	11,000	12,000	1,000	9.09%
6742 Bank/Merchant Fees	1,341	1,200	1,250	1,200	1,700	500	41.67%
6755 Property Tax Administration - Counties	20,019	20,000	10,060	17,500	17,500	-	0.00%
6760 Leadership Admin Development	1,391	2,500	2,745	1,000	5,000	4,000	400.00%
6765 Election Costs/Reserve	5,086	5,000	3,465	25,000	-	(25,000)	-100.00%
6770 Dues, Subscriptions, Membership	11,950	10,000	9,735	12,000	15,000	3,000	25.00%
6788 Printing & Reproduction	3,415	10,000	2,587	6,000	3,000	(3,000)	-50.00%
6795 Travel/Transportation	3,226	7,500	2,891	4,000	5,000	1,000	25.00%
6970 Community Dev/Training	28,227	10,000	8,769	10,000	7,500	(2,500)	-25.00%
<b>Total 6700 Overhead/Administration</b>	<b>215,871</b>	<b>200,201</b>	<b>203,211</b>	<b>205,400</b>	<b>231,075</b>	<b>23,275</b>	<b>11.33%</b>
<b>7000 Urgent Care</b>							
7011 Admin Salaries-Alloc to UC	23,988	23,988	18,986	25,315	26,154	839	3.31%
7050 UC Contract	754,756	754,738	666,663	800,000	800,000	-	0.00%
<b>Total 7000 Urgent Care</b>	<b>778,744</b>	<b>778,726</b>	<b>685,649</b>	<b>825,315</b>	<b>826,154</b>	<b>839</b>	<b>0.10%</b>
<b>8000 Interest Expense</b>		3,000				-	
8005 EMS Interest Expense	2,033	1,500	934	2,000	-	(2,000)	-100.00%
<b>Total 8000 Interest Expense</b>	<b>2,033</b>	<b>4,500</b>	<b>934</b>	<b>2,000</b>	<b>-</b>	<b>(2,000)</b>	<b>-100.00%</b>
9500 Depreciation Expense	87,734	91,202	78,053	93,664	96,349	2,685	2.87%
999 Prior Period Adjustments (66000 PAYROLL EXPENSESE)	2						
<b>Total Expenses</b>	<b>2,564,284.17</b>	<b>2,527,927.00</b>	<b>2,329,206</b>	<b>2,751,975</b>	<b>3,018,315</b>	<b>263,940</b>	<b>9.59%</b>
<b>Net Operating Income</b>	<b>10,808</b>	<b>(65,194)</b>	<b>341,539</b>	<b>12,119</b>	<b>45,079</b>	<b>106,455</b>	<b>878.41%</b>
Other Miscellaneous Expense	-						
Net Other Income	-	-		-		-	
<b>Net Income</b>	<b>10,808</b>	<b>(65,194)</b>	<b>341,539</b>	<b>12,119</b>	<b>45,079</b>	<b>106,455</b>	<b>878.41%</b>

	ACTUAL FY19	BUDGET FY19	ACTUAL FY20	BUDGET FY20	BUDGET FY21
EMS Income	1,941,469	1,818,791	1,885,969	1,937,292	2,236,592
EMS Expense	1,785,540	1,749,201	1,643,557	1,926,660	2,192,161
EMS Net	155,929.25	69,590	242,412	10,632	44,431
UC Income	633,623	643,942	784,776	826,802	826,802
UC Expense	778,744	778,726	685,649	825,315	826,154
UC Net	(145,121.35)	(134,784)	99,127	1,487	648

FINAL DRAFT May 15, 2020 2:45 PM

\$130K reserves  
< Prop Taxes

only 10 months

## COAST LIFE SUPPORT DISTRICT

### RESOLUTION No: 265 ADOPTION OF PRELIMINARY BUDGET FOR FISCAL YEAR 2021

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	\$ 826,802
Mendocino County	\$ 1,314,187
Ambulance Billings	\$ 652,405
Miscellaneous	<u>\$ 270,000</u>
Total Budgeted Revenue	\$ 3,063,394

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

Ambulance Operations	\$ 1,864,737
Administration & Overhead	231,075
Urgent Care Program	826,154
Interest & Depreciation	96,349
Reserve Fund Decrease	<u>45,079</u>
Total Budgeted Expenditures	\$ 3,063,394

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 2021.

The above resolution was introduced by Director Schwartz, who moved its adoption, seconded by Director Beaty, and passed and adopted on this 17<sup>th</sup> day of June, 2020 by the following roll call vote:

Directors:	André	Aye	No	Abstain	Absent
	Beaty	Aye	No	Abstain	Absent
	Bower	Aye	No	Abstain	Absent
	Paterson	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.

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Naomi Schwartz, Secretary

**COAST LIFE SUPPORT DISTRICT  
RESOLUTION No. 266**

**ADOPTION OF AMBULANCE RATES FOR FISCAL YEAR 2021**

WHEREAS, the Coast Life Support District last adjusted the rates at which Ambulance Services are billed in June of 2016, and

WHEREAS, with the passage of AB 2091 Berg, as of January 1, 2007, the District may charge Residents and Taxpayers of the District a Fee for Service Rate less than that of Non-Residents and Non-Taxpayers, and

WHEREAS, the District recognizes the disparity between what a Resident/Taxpayer actually pays for services versus what a Non-Resident/Non-Taxpayer pays, by their parcel tax contribution, and

WHEREAS, as Resident/Taxpayer is defined as either having a mailing address within the District or owning property within the District or both,

BE IT THEREFORE RESOLVED that the rate schedule adopted, effective July 1, 2017 and in effect until changed by resolution, be as follows:

<i>Service</i>	<i>BLS</i>	<i>ALS I</i>	<i>ALS II</i>
Non-Emergency	\$1,381	\$2,726	
Emergency	\$1,887	\$3,258	\$3,814
Night	\$130	\$415	\$415
Mileage (per mile)	\$36	\$36	\$36
Oxygen	\$162	\$162	\$162
EKG		\$227	\$227
Treat & Release	\$250	\$500	
Late Payment Fee	\$25	\$25	\$25

AND BE IT FURTHER RESOLVED, that Resident/Taxpayers will receive a fifty percent reduction of the balance owed after third-party payments, if any, and if that reduced balance is paid in full within sixty days.

AND BE IT FURTHER RESOLVED, that for transport of a Resident/Taxpayer which does not leave the District, the balance owed after third party payments will not exceed fifty percent of the sum of the applicable Treat & Release fee plus mileage charge.

AND BE IT FURTHER RESOLVED, that these charges be reviewed annually and changes included in the Budget for the following year.

The above RESOLUTION was introduced by Director Beaty, who moved for its adoption and seconded by Director Schwartz,

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

Ayes:	Noes:	Abstain:	Absent:
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WHEREUPON, the President declared the foregoing RESOLUTION adopted on this 17<sup>th</sup> day of June, 2020 and SO ORDERED.

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Naomi Schwartz, Secretary

See attached Level of Service definitions applicable to said rates.

## **Resolution 266: Defined Levels of Ambulance Services**

It is the responsibility of the Biller to review the documentation on the Patient Care Report and determine the appropriate level of service that was provided to the patient. This is a very important step in the billing process. The level of service is determined in the following ways:

- Emergent Response VS Non Emergent Response
- The type of assessment that was provided (i.e. ALS or BLS)
- The type of interventions that were performed (i.e. ALS or BLS)
- The patient's chief complaint
- You must look at the whole picture to determine the level of service

### **Emergency VS Non-Emergency**

An Emergency level of ambulance service depends upon how the ambulance was dispatched and how it responded. An Emergency is determined based on the information available to the dispatcher at the time of the call, using standard dispatch protocols.

### **Definition of Emergency**

The patient's condition is an emergency that renders the patient unable to go to the hospital by other means. Emergency ambulance services are services provided after the sudden onset of a medical condition. Acute signs and/or symptoms of sufficient severity must manifest the emergency medical condition such that the absence of immediate medical attention could reasonably be expected to result in one or more of the following:

- Place the patient's health in serious jeopardy.
- Cause serious impairment to bodily functions.
- Cause serious dysfunction of any bodily organ or part.

The above definition has been extended to include responding immediately.

**Emergency response means** responding immediately at the BLS or ALS1 level of service to a 911 call or the equivalent in areas without a 911 call system. An immediate response is one in which the ambulance supplier begins as quickly as possible to take the steps necessary to respond to the call.

### **Non-Emergency**

#### ***Medical Necessity***

Ambulance services are covered in the absence of an emergency condition in either of the two general categories of circumstances that follow:

The patient being transported has, **at the time of ground transport**, a condition such that all other methods of ground transportation (e.g., taxi, private automobile, wheelchair van or other vehicle) are contraindicated. In this circumstance, "contraindicated" means that the patient cannot be transported by any other means from the origin to the destination without endangering the individual's health. Having or having had a serious illness, injury or surgery does not necessarily justify Medicare payment for ambulance transportation; thus a thorough assessment and documented description of the patient's current state is essential for coverage. All statements about the patient's medical condition must be validated in the documentation using contemporaneous objective observations and findings.

The patient is bed-confined before, during and after transportation. The definition of “bed-confined” means the patient must meet all of the following three criteria:

- Unable to get up from bed without assistance.
- Unable to ambulate.
- Unable to sit in a chair (including a wheelchair).

As stated in the bullet above, statements about the patient’s bed-bound status must be validated in the record with contemporaneous objective observations and findings as to the patient’s functional physical and/or mental limitations that have rendered him bed-bound.

### **Levels of Service**

There are 6 levels of service that can be provided to the patient. ALS1 Emergency, ALS2 Emergency, BLSE Emergency, SCT (Specialty Care Transport), ALS Non-Emergency, BLS Non Emergency.

### **Advanced Life Support (ALS1) Level 1**

An **ALS** ambulance has complex, specialized, life-sustaining equipment and, ordinarily, equipment for radiotelephone contact with a physician or hospital. Typically, this type of ambulance would require mobile coronary care units and other ambulance vehicles that are appropriately equipped and staffed by personnel trained and authorized to administer IVs, provide anti-shock trousers, establish and maintain a patient’s airway, defibrillate the heart, relieve pneumothorax conditions, and perform other advanced life support procedures or services such as cardiac (EKG) monitoring. The ambulance must be staffed by at least two people, one of whom must be certified by the state of local authority as an EMT-Intermediate or an EMT-Paramedic.

**ALS assessment** is an assessment performed by an ALS crew as part of an **emergency response** that was necessary because the patient’s reported condition at the time of dispatch was such that only an ALS crew was qualified to perform the assessment. An ALS assessment does not necessarily result in a determination that the patient requires an ALS level of service.

**ALS Intervention** – ALS Intervention: A procedure that is, in accordance with state and local laws, required to be furnished by ALS personnel. The service must be medically necessary to qualify as an intervention for payment of an ALS level of services.

**ALS1 – ALS, Level 1 A0427:** Where medically necessary, transportation by ground ambulance vehicle, medically necessary supplies and services, and either an ALS assessment by ALS personnel or the provision of at least one ALS intervention. EMT-Intermediate scope includes but is not limited to:

- Administration of IV fluids (except blood or blood products).
  - **Note:** An unsuccessful attempt to perform an ALS intervention (e.g., endotracheal intubation was attempted, but was unsuccessful) may qualify the transport for billing at the appropriate ALS level provided that the intervention would have been reasonable and necessary had it been successful.
- Peripheral venous puncture.
- Blood drawing.
- Monitoring IV solutions during transport that contain potassium.

- Administration of approved medications, IV, Sub Q, sublingual, nebulizer inhalation, IM (limited to deltoid and thigh sites only).

## **Advanced Life Support (ALS2) Level 2**

**ALS2 – ALS, Level 2 A0433:** Where medically necessary, transportation by ground ambulance vehicle, medically necessary supplies and services, and at least three separate administrations of one or more medications by intravenous push/bolus or by continuous infusion, excluding crystalloid hypotonic, isotonic and hypertonic solutions (dextrose, normal saline, or Ringer's lactate); by intravenous push/bolus or by continuous infusion excluding crystalloid hypotonic, isotonic and hypertonic solutions (dextrose, normal saline, or Ringer's lactate); or transportation, medically necessary supplies and services, and the provision of at least one of the following procedures:

- Manual defibrillation/cardio version
- Endotracheal intubation
- Central venous line
- Cardiac pacing
- Chest decompression
- Surgical airway
- Intraosseous line

**Note:** An unsuccessful attempt to perform an ALS intervention (e.g., endotracheal intubation was attempted, but was unsuccessful) may qualify the transport for billing at the appropriate ALS level provided that the intervention would have been reasonable and necessary had it been successful.

**Note:** Crystalloid fluids include fluids such as 5 percent Dextrose in water, Saline and Lactated Ringer's. Medications that are administered by other means, for example: intramuscular/subcutaneous injection, oral, sublingually or nebulized, do not qualify to determine whether the ALS2 level rate is payable. However, this is not an all-inclusive list. Likewise, a single dose of medication administered fractionally (i.e., one-third of a single dose quantity) on three separate occasions does not qualify for the ALS2 payment rate. The criterion of multiple administrations of the same drug requires a suitable quantity and amount of time between administrations that is in accordance with standard medical practice guidelines. The fractional administration of a single dose (for this purpose meaning a standard or protocol dose) on three separate occasions does not qualify for ALS2 payment.

**Manual External Defibrillator** units are used in conjunction with (or more often have inbuilt) electrocardiogram readers, which the healthcare provider uses to diagnose a cardiac condition (most often fibrillation or tachycardia although there are some other rhythms which can be treated by different shocks). The healthcare provider will then decide what charge (in joules) to use, based on proven guidelines and experience, and will deliver the shock through paddles or pads on the patient's chest. As they require detailed medical knowledge, these units are generally only found in hospitals and on some ambulances. In the United States, many advanced EMTs and all paramedics are trained to recognize lethal arrhythmias and deliver appropriate electrical therapy with a manual defibrillator when appropriate.

**Cardioversion** is a medical procedure by which an abnormally fast heart rate or cardiac arrhythmia is converted to a normal rhythm using electricity or drugs.



**Endotracheal Intubation** is a procedure by which a tube is inserted through the mouth down into the trachea (the large airway from the mouth to the lungs). Before surgery, this is often done under deep sedation. In emergency situations, the patient is often unconscious at the time of this procedure.

**Central Venous Line** is a long fine catheter with an opening (sometimes multiple openings) at each end used to deliver fluids and drugs. The central line is inserted through the skin into a large vein that feeds into a larger vein sitting above the heart, so that the tip of the catheter sits close to the heart. There are several veins that are suitable for access, and the line may be inserted above or below the collarbone, on the side of your neck, in your groin or at the front of the elbow. The actual skin entry site depends on which vein is used. The line that is inserted at the elbow is called a PICC (**P**eripherally **I**nserted **C**entral **C**atheter), and the lines that enter the shoulder or neck are called Central Venous Lines.

**Cardiac Pacing** is a temporary means of pacing a patient's heart during a medical emergency. It is accomplished by delivering pulses of electric current through the patient's chest, which stimulates the heart to contract. The most common indication for cardiac pacing is an abnormally slow heart rate.

**Chest Decompression** involves decompression of the affected chest cavity to release the pressure that has developed. Decompression can be achieved, with minimal risk, by the insertion of a 14 or 16 gauge needles into the second inter-costal space at the midclavicular line. The needle must be inserted superior to the rib because the intercostal artery, vein and nerve follow along the inferior portion of the rib.

**Surgical Airway** is also known as Cryothyroidotomy. The simplest technique is needle cricothyroidotomy. This involves placing a 12 gauge cannula into the trachea via the cricothyroid membrane. This will allow adequate ventilation for up to 45 minutes.

**Intraosseous Line** is the process of injecting directly into the marrow of the bone. The needle is injected through the bone's hard cortex and into the soft marrow interior. Often the antero-medial aspect of the tibia is used as it lies just under the skin and can easily be palpated and located. Anterior aspect of the femur and the superior iliac crest are other sites that can be used.

### **Basic Life Support Emergency (BLSE)**

**BLSE A0429** - is transportation by ground ambulance vehicle and the provision of medically necessary supplies and services, including BLS ambulance services as defined by the state. The ambulance must be staffed by an individual who is qualified in accordance with state and local laws as an EMT-Basic. These laws may vary from state to state or within a state. For example, only in some jurisdictions is an EMT-Basic permitted to operate limited equipment onboard the vehicle, assist more qualified personnel in performing assessments and interventions, and establish an IV line.

**Emergency** – When medically necessary, the provision of BLS services, as specified above, in the context of an emergency response. An emergency response is one that, at the time the ambulance provider or supplier is called, it responds immediately. An immediate response is one in which the ambulance provider/supplier begins as quickly as possible to take the steps necessary to respond to the call.

### **Specialty Care Transport (SCT)**

**SCT A0434-** is the interfacility transportation of a critically injured or ill beneficiary by a ground ambulance vehicle, including the provision of medically necessary supplies and services, at a level of service beyond the scope of the EMT-Paramedic. SCT is necessary when a beneficiary's condition requires ongoing care that must be furnished by one or more health professionals in an appropriate specialty area, for example, emergency or critical care nursing, emergency medicine, respiratory

### **Advance Life Support Non-Emergency**

**ALS Non-Emergency (ALS1 H-H) A0426-**Where medically necessary, transportation by ground ambulance vehicle, medically necessary supplies and services and either an ALS assessment by ALS personnel or the provision of at least one ALS intervention. EMT Intermediate scope includes but not limited to:

- Administration of IV fluids (except blood or blood products).
- Peripheral venous puncture.
- Blood drawing.
- Monitoring IV solutions during transport that contain potassium.
- Administration of approved medications, IV, Sub Q, sublingual, nebulizer inhalation, IM (limited to deltoid and thigh sites only).

### **Basic Life Support Non-Emergency**

**BLS1 Non-Emergency A0428-** Basic Life Support (BLS): Medically necessary transportation by ground ambulance vehicle and medically necessary supplies and services, plus the provision of BLS ambulance services. The ambulance must be staffed by an individual who is qualified in accordance with state and local laws as an Emergency Medical Technician-Basic (EMT-Basic). These laws may vary from state to state. For example, only in some states is an EMT-Basic permitted to operate limited equipment on board the vehicle, assist more qualified personnel in performing assessments and interventions, and establish a Peripheral Intravenous (IV) line.

BLS1 level of service would be used if the response was not immediate. You may see the patient transported to one of the following.

- Skilled Nursing Facility
- Residence
- Dialysis Center
- Clinic
- Scheduled appointment
- Hospital

**COAST LIFE SUPPORT DISTRICT  
RESOLUTION No. 267**

**ADOPTION OF TAX RATES FOR FISCAL YEAR 2021**

WHEREAS, in March 2012 the voters of the Coast Life Support District authorized the District Board of Directors to levy a Special Tax of up to \$44 per benefit unit to support Emergency Medical Services, and

WHEREAS, in April 2014, the voters of the District approved a Special Tax assessment of up to \$74 for a developable parcel, and \$148 for a developed parcel, to support Urgent Care, and

WHEREAS, in May 2020, the voters of the Coast Life Support District authorized the District Board of Directors to increase the Special Tax supporting Emergency Medical Services from \$44 per benefit unit to \$61 per benefit unit, and

WHEREAS, the District's budget for Fiscal Year 2021 requires a Special Tax rate of \$61 per unit of benefit for Emergency Medical Services and \$74.00/\$148.00 Special Tax for developable/developed parcels to support Urgent Care,

BE IT RESOLVED, THEREFORE that the Special Tax rate of \$61 per unit of benefit for Emergency Medical Services, plus \$74.00/\$148.00 per developable/developed parcel for Urgent Care, be assessed accordingly to parcels in the District,

BE IT FURTHER RESOLVED that the Coast Life Support District renews its agreements with the appropriate offices of Mendocino and Sonoma Counties for collections of the assessments through the property tax rolls.

The above RESOLUTION was introduced by Director Schwartz, who moved for its adoption, seconded by Director Beaty and passed on this 17<sup>th</sup> day of June 2020 by the following roll call vote:

Directors:	André	Aye	No	Abstain	Absent
	Beaty	Aye	No	Abstain	Absent
	Bower	Aye	No	Abstain	Absent
	Paterson	Aye	No	Abstain	Absent
	Schwartz	Aye	No	Abstain	Absent
	Tittle	Aye	No	Abstain	Absent
	Villagomez	Aye	No	Abstain	Absent

Ayes:	Noes:	Abstain:	Absent:
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WHEREUPON, the President declared the foregoing RESOLUTION adopted and SO ORDERED.

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Naomi Schwartz, Secretary

**COAST LIFE SUPPORT DISTRICT  
RESOLUTION No. 268**

**RESOLUTION OF THE BOARD OF DIRECTORS OF COAST LIFE SUPPORT  
DISTRICT, STATE OF CALIFORNIA, ADOPTING THE PROPOSITION 4  
APPROPRIATION LIMIT FOR THE FISCAL YEAR 2020-2021**

WHEREAS, each fiscal year a Proposition 4 limit must be established; and

WHEREAS, Proposition 111, Article XIII B, requires the Board of Directors of the Coast Life Support District to choose and adopt a certain method to increase this limit every year; and

WHEREAS, the Coast Life Support District had approved and adopted an Appropriation Limit for Fiscal Year 2019-2020 of \$2,211,702; and

WHEREAS, the Coast Life Support District has chosen the California Per Capita Personal Income and the Sonoma County Population Change Percentage factors in establishing the Proposition 4 limit; and

WHEREAS, the Board of Directors of the Coast Life Support District, now accepts the Sonoma County Treasurer's calculation for the Appropriation Limit to be \$2,605,845 based on sum of the tax income increase and the annual percentage change for the California Per Capita Personal Income which is 3.73% and the local population growth change which is 0.22%,

NOW, THEREFORE, BE IT RESOLVED that the Board of Directors of the Coast Life Support District hereby adopts a new Appropriation Limit in the amount of \$2,605,845 for the Fiscal Year 2020-2021,

THE FOREGOING RESOLUTION was introduced by Director Beaty, who moved its adoption, seconded by Director Schwartz, and then adopted by the following vote on the 17<sup>th</sup> day of June, 2020,

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

Ayes:	Noes:	Abstain:	Absent:
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WHEREUPON, the President declared the foregoing RESOLUTION adopted and

SO, ORDERED

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Naomi Schwartz, Secretary to the Board

## 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
<b>FY19</b>													
JUNE '19	69	\$ 245,187	\$ 127,965	\$ 28,276	\$ 5,326	\$ 83,620	\$ 49,795	\$ -	\$ 49,795	\$ 16,416	\$ 800	\$ 62	\$ 437,528
<b>FY20</b>													
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
OCTOBER '19	64	\$ 242,079	\$ 117,750	\$ 57,124	\$ 5,077	\$ 62,127	\$ 80,054	\$ 2,119	\$ 77,935	\$ -	\$ 4,914	\$ 158	\$ 535,648
NOVEMBER '19	58	\$ 236,748	\$ 138,127	\$ 38,467	\$ 250	\$ 59,904	\$ 68,727	\$ -	\$ 68,727	\$ -	\$ -	\$ -	\$ 526,824
DECEMBER '19	50	\$ 199,255	\$ 132,913	\$ 26,184	\$ 10,389	\$ 29,770	\$ 109,483	\$ -	\$ 109,483	\$ 15,870	\$ 6,211	\$ -	\$ 425,030
JANUARY '20	43	\$ 199,161	\$ 92,162	\$ 46,979	\$ 1,937	\$ 58,084	\$ 85,951	\$ 146	\$ 85,805	\$ (750)	\$ 750	\$ -	\$ 397,308
FEBRUARY '20	50	\$ 190,789	\$ 134,677	\$ 31,850	\$ 600	\$ 23,663	\$ 54,253	\$ -	\$ 54,253	\$ -	\$ 499	\$ 3,907	\$ 370,126
MARCH '20	59	\$ 261,643	\$ 110,627	\$ 48,243	\$ 3,907	\$ 98,866	\$ 52,109	\$ 1,137	\$ 50,972	\$ -	\$ 1,000	\$ 30	\$ 417,051
APR '20	46	\$ 179,336	\$ 61,654	\$ 36,685	\$ 9,182	\$ 71,815	\$ 42,942	\$ 848	\$ 42,094	\$ -	\$ -	\$ -	\$ 446,772
MAY '20	44	\$ 178,031	\$ 89,447	\$ 30,422	\$ 778	\$ 57,384	\$ 71,715	\$ 196	\$ 71,519	\$ -	\$ -	\$ 306	\$ 432,943

MAY '19	56	\$ 215,716	\$ 74,460	\$ 50,320	\$ 967	\$ 89,969	\$ 67,379	\$ -	\$ 67,379	\$ 26,680	\$ 1,948	\$ 500	\$ 420,858
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<b>FY To Date</b>	612	\$ 2,417,075	\$ 1,130,152	\$ 440,413	\$ 54,809	\$ 791,701	\$ 754,729	\$ 4,445	\$ 750,284	\$ 31,187	\$ 23,142	\$ 8,327
<b>Last 12 Months</b>	681	\$ 2,662,262	\$ 1,258,116	\$ 468,690	\$ 60,136	\$ 875,321	\$ 804,524	\$ 4,445	\$ 800,079	\$ 47,603	\$ 23,942	\$ 8,389

<b>Monthly Average FY To Date</b>	61	\$ 219,734	\$ 102,741	\$ 40,038	\$ 4,983	\$ 71,973	\$ 68,612	\$ 404	\$ 68,208	\$ 2,835	\$ 2,104	\$ 757
<b>Monthly Average Last 12 Months</b>	57	\$ 221,855	\$ 104,843	\$ 39,057	\$ 5,011	\$ 72,943	\$ 67,044	\$ 370	\$ 66,673	\$ 3,967	\$ 1,995	\$ 699

AGING							
Month	Current	31-60	61-90	91-120	121-180	180+	Balance
APR	\$ 60,830	\$ 67,713	\$ 75,517	\$ 12,680	\$ 55,096	\$ 161,107	\$ 161,107

<b>CMS TRANSPORTS ON -</b>	
<b>TOTAL</b>	<b>\$ 656.06</b>

# Coast Life Support District

## Profit & Loss Budget Overview FY20

### July 2019 through May 2020

	Jul '19 - May 20	Budget	\$ Over Budget	% of Budget
<b>Ordinary Revenue/Expense</b>				
<b>Revenue</b>				
4000 · CLSD Special Taxes	1,856,975.53	1,662,338.32	194,637.21	111.7%
4100 · Interest Revenue	68.22	10,083.33	-10,015.11	0.7%
4200 · Ambulance Revenue	756,535.90	595,833.33	160,702.57	127.0% <sup>1</sup>
4400 · Miscellaneous Revenue	17,954.85	45,833.33	-27,878.48	39.2%
4410 · Intergovernmental Transport(IGT)	244,451.07	160,902.50	83,548.57	151.9%
4420 · Ground Emerg Med Transport	16,687.81	16,500.00	187.81	101.1%
4421 · GEMT QAF Revenue	0.00	42,262.00	-42,262.00	0.0%
<b>Total Revenue</b>	<b>2,892,673.38</b>	<b>2,533,752.81</b>	<b>358,920.57</b>	<b>114.2%</b>
<b>Expense</b>				
5000 · Wages and Benefits	1,334,370.82	1,340,097.91	-5,727.09	99.6%
6000 · Ambulance Operations	163,640.49	150,031.75	13,608.74	109.1%
66000 · Payroll Expenses	0.00	0.00	0.00	0.0%
6700 · Overhead/Administration	225,642.45	188,283.35	37,359.10	119.8%
6971 · IGT	0.00	0.00	0.00	0.0%
7000 · Urgent Care	756,534.72	756,538.75	-4.03	100.0%
8000 · Interest Expense	986.44	1,833.33	-846.89	53.8%
9000 · Other Expenses	0.00	0.00	0.00	0.0%
9500 · Depreciation Expense	85,858.67	85,858.67	0.00	100.0%
9999 · Prior Period Adjustment	0.00	0.00	0.00	0.0%
<b>Total Expense</b>	<b>2,567,033.59</b>	<b>2,522,643.76</b>	<b>44,389.83</b>	<b>101.8%</b>
<b>Net Ordinary Operating Surplus</b>	<b>325,639.79</b>	<b>11,109.05</b>	<b>314,530.74</b>	<b>2,931.3%</b>
<b>Net Income</b>	<b>325,639.79</b>	<b>11,109.05</b>	<b>314,530.74</b>	<b>2,931.3%</b>

1. AMBULANCE REVENUE: \*Ref Wittman YTD Report (acc 4220 + Column F minus H/K/L)

# Coast Life Support District

## Profit & Loss Budget Overview FY20

### July 2019 through May 2020

	Jul '19 - May 20	Budget	\$ Over Budget	% of Budget
<b>Ordinary Revenue/Expense</b>				
<b>Revenue</b>				
4000 · CLSD Special Taxes				
4001 · Mendocino County Taxes				
4004 · Mendocino Ambulance Tax	485,014.94	437,858.66	47,156.28	110.8%
4009 · Mendocino Urgent Care Tax	441,509.85	398,520.83	42,989.02	110.8%
4010 · Mendocino Ad Valorem Tax	107,183.22	96,937.50	10,245.72	110.6%
<b>Total 4001 · Mendocino County Taxes</b>	<b>1,033,708.01</b>	<b>933,316.99</b>	<b>100,391.02</b>	<b>110.8%</b>
4002 · Sonoma County Taxes				
4024 · Sonoma Ambulance Tax	390,026.25	343,882.00	46,144.25	113.4%
4029 · Sonoma Urgent Care Tax	412,166.28	359,381.00	52,785.28	114.7%
4030 · Sonoma County Special Tax	21,074.99	25,758.33	-4,683.34	81.8%
<b>Total 4002 · Sonoma County Taxes</b>	<b>823,267.52</b>	<b>729,021.33</b>	<b>94,246.19</b>	<b>112.9%</b>
<b>Total 4000 · CLSD Special Taxes</b>	<b>1,856,975.53</b>	<b>1,662,338.32</b>	<b>194,637.21</b>	<b>111.7%</b>
4100 · Interest Revenue	68.22	10,083.33	-10,015.11	0.7%
4200 · Ambulance Revenue				
4201 · Amb Transport Billings				
4220 · Writedowns - Misc.	-89,974.42	0.00	-89,974.42	100.0%
4225 · Writedowns - MediCare/Cal	-1,570,565.08	0.00	-1,570,565.08	100.0%
4201 · Amb Transport Billings - Other	2,417,075.40	595,833.33	1,821,242.07	405.7%
<b>Total 4201 · Amb Transport Billings</b>	<b>756,535.90</b>	<b>595,833.33</b>	<b>160,702.57</b>	<b>127.0%</b>
<b>Total 4200 · Ambulance Revenue</b>	<b>756,535.90</b>	<b>595,833.33</b>	<b>160,702.57</b>	<b>127.0%</b>
4400 · Miscellaneous Revenue	17,954.85	45,833.33	-27,878.48	39.2%
4410 · Intergovernmental Transport(IGT)	244,451.07	160,902.50	83,548.57	151.9%
4420 · Ground Emerg Med Transport	16,687.81	16,500.00	187.81	101.1%
4421 · GEMT QAF Revenue	0.00	42,262.00	-42,262.00	0.0%
<b>Total Revenue</b>	<b>2,892,673.38</b>	<b>2,533,752.81</b>	<b>358,920.57</b>	<b>114.2%</b>
<b>Expense</b>				
5000 · Wages and Benefits				
5200 · Health Insurance	118,767.90	121,000.00	-2,232.10	98.2%
5300 · Payroll Taxes Emplr Costs	33,344.75	36,287.17	-2,942.42	91.9%
5350 · PERS Employer Costs	138,973.60	145,053.33	-6,079.73	95.8%
5405 · Administration Salaries				
5405.1 · Admin Salaries-Alloc/UC	-23,205.42	-23,205.42	0.00	100.0%
5405 · Administration Salaries - Other	262,553.00	235,611.75	26,941.25	111.4%
<b>Total 5405 · Administration Salaries</b>	<b>239,347.58</b>	<b>212,406.33</b>	<b>26,941.25</b>	<b>112.7%</b>
5410 · Ambulance Operations Wages	717,519.81	734,444.33	-16,924.52	97.7%
5430 · Extra Duty/Stipend Pay/DA	41,141.35	40,879.67	261.68	100.6%
5500 · Work Comp Insurance	45,275.83	50,027.08	-4,751.25	90.5%
<b>Total 5000 · Wages and Benefits</b>	<b>1,334,370.82</b>	<b>1,340,097.91</b>	<b>-5,727.09</b>	<b>99.6%</b>
6000 · Ambulance Operations				
6030 · Med. Director Fee-non AHUC	34,650.00	34,650.00	0.00	100.0%
6040 · Dispatch Services	22,247.47	20,048.42	2,199.05	111.0%
6050 · Misc Reimbursements	0.00	0.00	0.00	0.0%
6100 · Station/Crew Expenses				
5100 · Uniforms & Med Tests	4,449.44	3,208.33	1,241.11	138.7%
6101 · Facility Repair & Maintenance	11,577.66	6,875.00	4,702.66	168.4%
6102 · Facility Furniture	286.99	0.00	286.99	100.0%
6110 · Supps, Rental, Clean. etc	7,621.67	6,875.00	746.67	110.9%
6210 · Veh. Repair & Maintenance	17,253.31	20,625.00	-3,371.69	83.7%
6240 · Vehicle Fuel	18,318.33	22,916.67	-4,598.34	79.9%

# Coast Life Support District

## Profit & Loss Budget Overview FY20

### July 2019 through May 2020

	Jul '19 - May 20	Budget	\$ Over Budget	% of Budget
6410 · Radios & Comm Equip				
6410.1 · ATT Tower Lease	687.50	0.00	687.50	100.0%
6410 · Radios & Comm Equip - Other	2,439.26	2,750.00	-310.74	88.7%
<b>Total 6410 · Radios &amp; Comm Equip</b>	<b>3,126.76</b>	<b>2,750.00</b>	<b>376.76</b>	<b>113.7%</b>
6510 · Medical Supplies & Equip	42,444.48	27,500.00	14,944.48	154.3%
<b>Total 6100 · Station/Crew Expenses</b>	<b>105,078.64</b>	<b>90,750.00</b>	<b>14,328.64</b>	<b>115.8%</b>
6980 · Misc. Employee Train. Exps	1,664.38	4,583.33	-2,918.95	36.3%
<b>Total 6000 · Ambulance Operations</b>	<b>163,640.49</b>	<b>150,031.75</b>	<b>13,608.74</b>	<b>109.1%</b>
66000 · Payroll Expenses	0.00	0.00	0.00	0.0%
6700 · Overhead/Administration				
6180 · Utilities	13,848.76	11,916.67	1,932.09	116.2%
6188 · Telephone	5,943.26	5,958.33	-15.07	99.7%
6300 · Insurance	11,551.33	15,858.33	-4,307.00	72.8%
6713 · Ambulance Billing	43,713.64	35,750.00	7,963.64	122.3% <sup>3</sup>
6714 · GEMT QAF Expense	24,512.26	0.00	24,512.26	100.0%
6718 · Office Supp/Equip/Software				
6718.1 · Office Supplies	2,157.25	2,291.67	-134.42	94.1%
6718.2 · Computer Equipment	2,004.72	1,833.33	171.39	109.3%
6718.3 · Software	3,254.23	2,750.00	504.23	118.3%
6718 · Office Supp/Equip/Software - Other	0.00	0.00	0.00	0.0%
<b>Total 6718 · Office Supp/Equip/Software</b>	<b>7,416.20</b>	<b>6,875.00</b>	<b>541.20</b>	<b>107.9%</b>
6720 · Board Expenses	2,807.81	2,291.67	516.14	122.5%
6730 · Consultants				
6731 · Administration	26,752.00 <sup>4</sup>			
6734 · IT	5,689.41	6,416.67	-727.26	88.7%
6735 · EMS Survey	3,112.20	2,750.00	362.20	113.2%
6737 · Financial/Bookkeeping	2,404.36	2,750.00	-345.64	87.4%
6738 · Legal	8,763.00	4,583.33	4,179.67	191.2% <sup>5</sup>
6739 · Policy Development	0.00	4,400.00	-4,400.00	0.0%
6740 · Audit	9,400.00	8,341.67	1,058.33	112.7% <sup>6</sup>
6741 · Tax Administration - NBS	10,440.71	10,083.33	357.38	103.5%
<b>Total 6730 · Consultants</b>	<b>66,561.68</b>	<b>39,325.00</b>	<b>27,236.68</b>	<b>169.3%</b>
6742 · Bank/Merchant Fees	1,586.05	1,100.00	486.05	144.2%
6755 · Property Tax Admin	17,009.81	16,041.67	968.14	106.0%
6760 · Education/Professional Dev	2,744.72	916.67	1,828.05	299.4%
6765 · Election Costs/Reserve	3,541.78	22,916.67	-19,374.89	15.5%
6770 · Dues, Subscrip, Membership	10,236.62	11,000.00	-763.38	93.1%
6788 · Printing & Reproduction	2,943.84	5,500.00	-2,556.16	53.5%
6795 · Travel/Transportation	2,890.52	3,666.67	-776.15	78.8%
6970 · Community Dev/Training	8,334.17	9,166.67	-832.50	90.9%
<b>Total 6700 · Overhead/Administration</b>	<b>225,642.45</b>	<b>188,283.35</b>	<b>37,359.10</b>	<b>119.8%</b>
6971 · IGT	0.00	0.00	0.00	0.0%
7000 · Urgent Care				
7011 · Admin Salaries-Alloc to UC	23,205.42	23,205.42	0.00	100.0%
7050 · UC Contract	733,329.30	733,333.33	-4.03	100.0%
<b>Total 7000 · Urgent Care</b>	<b>756,534.72</b>	<b>756,538.75</b>	<b>-4.03</b>	<b>100.0%</b>
8000 · Interest Expense				
8005 · EMS Interest Expense	0.00	0.00	0.00	0.0%
8000 · Interest Expense - Other	986.44	1,833.33	-846.89	53.8%
<b>Total 8000 · Interest Expense</b>	<b>986.44</b>	<b>1,833.33</b>	<b>-846.89</b>	<b>53.8%</b>
9000 · Other Expenses	0.00	0.00	0.00	0.0%
9500 · Depreciation Expense	85,858.67	85,858.67	0.00	100.0%
9999 · Prior Period Adjustment	0.00	0.00	0.00	0.0%



# Coast Life Support District

## Profit & Loss Budget Overview FY20

### July 2019 through May 2020

	<u>Jul '19 - May 20</u>	<u>Budget</u>	<u>\$ Over Budget</u>	<u>% of Budget</u>
<b>Total Expense</b>	2,567,033.59	2,522,643.76	44,389.83	101.8%
<b>Net Ordinary Operating Surplus</b>	325,639.79	11,109.05	314,530.74	2,931.3%
<b>Net Revenue</b>	<u>325,639.79</u>	<u>11,109.05</u>	<u>314,530.74</u>	<u>2,931.3%</u>

1. AMBULANCE REVENUE: \*Ref Wittman YTD Report (acc 4220 + Column F minus H/K/L)  
.....
2. Admin Salary: The Opt's Manager's Ambulance Wage not spilt out from his Admin Salary (Budgeted to 5410), along with, Increase of hours needed for the in house bookkeeper shared duties.  
.....
3. Billing based on 6% of net revenue  
.....
4. DA Retirement Replacement Search Retainer  
.....
5. Ballot Measure Development  
.....
6. Audit: Actual vs. Accrual  
.....

## **District Administrator and Operations Manager Report May 2020**

### **District Administrator:**

- No changes to the Preliminary Budget. Expect minor tweaks before we adopt the final budget in Aug/Sep. Hopefully we hear about the Rural EMS Training Grant in time to modify the budget as needed if funded.
- CARES Act (Coronavirus Aid, Relief, and Economic Security Act) – I filed for the second round of funding the first week in May. We are supposed to hear if we qualify within 10 business days. I called the first week of June – they are significantly backlogged but did confirm they received our application. Just awaiting verification.
- Moving forward with the DA recruitment hiring process. June 22<sup>nd</sup> are now the planned BOD interview of the Recommended List of Candidates.
- Treasury maturing on May 21<sup>st</sup> (~\$255K) was sold and we purchased two CD's to assure FDIC insurance. Interest rate is a paltry .15% but the best we can do currently in the existing markets. We also have a \$253K treasury earning 1.07% due to mature the latter part of Aug, 2020.
- GEMT filing of cost report normally due in November each year is still delayed with no estimated due date
- GEMT-QAF is continues to be delayed as the new add-on reimbursement rate has not yet been determined.
- The Sonoma County Response For Proposals process to award the Exclusive Operating Area (EOA) stalled b/c of Covid-19 has begun again. Results of an agency survey completed by providers was “summarized” and presented at the first meeting. There is an obvious strong bias to representing the private provider. This is setting the stage for a highly contentious process to finalize the EOA RFP input sessions. I will elaborate during the meeting.
- REDCOM BOD special meetings looking at potential structure and how it and how it relates to the EOA discussion. Some of the Fire Agency representatives on the BOD are advocating for a Command Center set up. We are just entering into delicate conversations on this. Stay tuned.
- Continue to listen in on the Sonoma and Mendocino County Emergency Operations Center C-19 calls each week. Restrictions are being loosened but now awaiting to see if there is a spike in the number of cases. We are right on the verge of seeing a potential increase related to the Memorial Day holiday.
- Continue to discuss surge planning with RCMS and local Fire Departments if C-19 ramps up.

### **Operations Manager:**

#### **Deployment / Staffing**

- **HAPPY to announce...MAY was the first month with 100% 24/7 paramedic coverage. JULY is scheduled 24/7 paramedic**
- We are fully staffed and new employees are fully engaged.

- No major issues pending
- We are starting and will complete performance reviews in July
- We have begun scheduling regular supervisor meetings.

## **Facility**

\*\*\*\*Upstairs remodel is complete. We now have 4 bedrooms. Bathrooms were remodeled (used existing vanity with new hardware, toilets removed, new linoleum, new toilet gaskets, new light fixture, towel bars, and painted). Many staff members contributed. ...but special thanks to **Joe Peters** and **Ethan Pack** for pretty much stayed through the whole project. Chad Warner construction did a great job on the frame work. Dream Works did the flooring.

The facility is getting completely cleaned on Friday June 12. Inside and out. I would encourage all to mask up and come by for a tour next week.

## **Vehicles/Equipment / Supplies**

- All in good running order. No major repairs or issues
- Bronwyn Golly is leading new ambulance spec and bids and made a field trip to Sacramento Fire for demo of their Sprinter rigs
- We are rotating our cardiac monitors in for service.

## **Community events / Training**

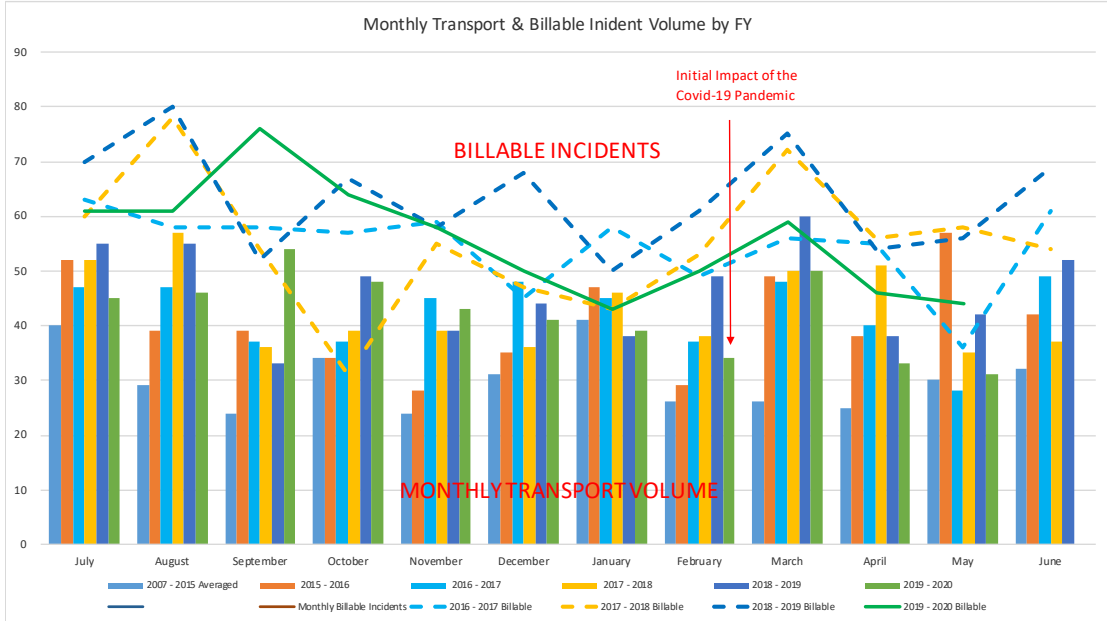
- COVID 19 WEB EX meeting are active
- WEB EX is being expanded
- CREST is scheduled Via WEB EX.

Most physical trainings continue to be on hold.

# 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	48	43	41	39	34	50	33	31	

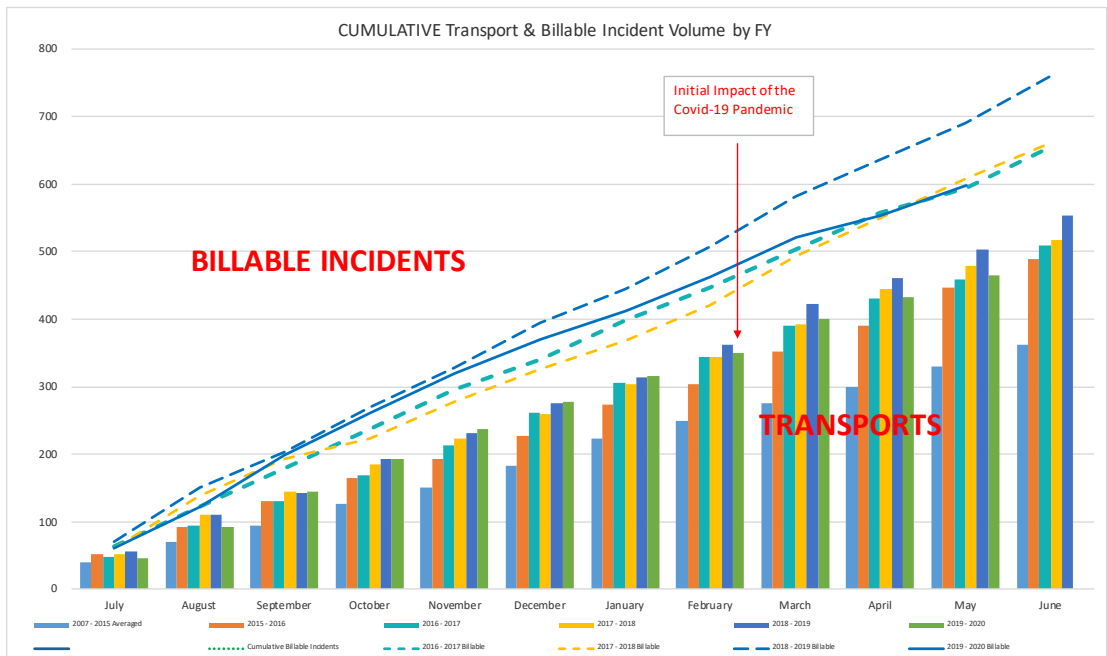
Monthly Billable Incidents	July	August	September	October	November	December	January	February	March	April	May	June
2016 - 2017 Billable	63	58	58	57	59	45	58	49	56	55	36	61
2017 - 2018 Billable	60	78	54	31	55	47	43	53	72	56	58	54
2018 - 2019 Billable	70	80	52	67	58	68	50	61	75	54	56	69
2019 - 2020 Billable	61	61	76	64	58	50	43	50	59	46	44	



# 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	193	236	277	316	350	400	433	464	

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	262	320	370	413	462	521	554	598	



## 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
20-May	67	87	38	58	29	41	0	1	1	1	0	0	30	42	7	5	15	19	8	14	0	4	0	0	7	10	1	0
20-Apr	65	78	44	53	31	31	0	1	2	7	0	1	33	38	4	5	10	20	11	15	1	1	0	2	6	8	2	3
20-Mar	73	108	61	79	47	49	0	1	2	13	0	3	49	60	6	8	10	27	10	17	3	7	0	0	14	10	0	8
20-Feb	69	82	47	63	30	35	1	0	1	14	0	2	34	49	1	6	16	20	16	13	1	4	0	1	11	10	0	6
20-Jan	64	71	49	47	38	27	0	4	0	11	0	0	39	38	6	4	14	17	11	9	1	2	0	1	8	5	0	7
19-Dec	67	100	51	62	36	29	0	2	4	15	4	2	40	44	4	4	7	29	11	18	1	2	0	1	10	10	0	6
19-Nov	71	89	55	54	42	31	0	3	1	7	0	1	43	39	8	4	18	20	12	16	1	1	0	1	13	5	1	1
19-Oct	84	99	54	64	47	38	0	4	1	11	0	2	48	49	7	10	17	19	16	15	2	1	1	1	11	15	0	6
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
	910	1090	654	735	484	445	2	23	23	100	5	14	512	539	81	68	180	260	163	181	15	34	2	7	126	112	11	47
	A/O		PCR		ALS		ALS>BLS		BLS		BLS>ALS		TOTAL		LZ		DRY RUN		T&R		TO RCMS				FROM RCMS			

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	30	9:00 A - 9:00 P	12	11	1	3	7	8	2	11	1 BLS transport the 1 day M122 not staffed --> transport to RCMS
	25	9:00 P - 9:00 A		1	0	0	1	1	0		
NOV	30	9:00 A - 9:00 P	7	7	1	0	6	6	0	6	
	20	9:00 P - 9:00 A		0	0	0	0	0	0		
DEC	29	9:00 A - 9:00 P	10	9	0	3	6	6	0	10	3 BLS Hand-Offs --> ALS; 1 BLS to LZ
	22	9:00 P - 9:00 A		1	0	1	0	1	0		
2020											
JAN	30	9:00 A - 9:00 P	8	8	2	1	5	5	0	5	No calls on the 1 BLS shift with no ALS coverage
	25	9:00 P - 9:00 A									
FEB	23	9:00 A - 9:00 P	8	6	0	3	3	6	0	7	1 BLS Hand-Off from ALS > Transport 1 BLS Cancel
	23	9:00 P - 9:00 A		2	1	0	1	1	0		
MAR	29	9:00 A - 9:00 P	14	12	1	3	10	12	0	12	2 BLS transports: (#1) to LZ (#2) REACH PM rode in ambulance transport
	20	9:00 P - 9:00 A		2							
APR	27	9:00 A - 9:00 P	10	9	1	3	5	6	0	6	BLS ran two calls out of RCMS. No Mutual Aid required in month.
	23	9:00 P - 9:00 A		1			1				
MAY	31	9:00 A - 9:00 P	10	7	1	1	5	5	1		For first time we had 100% paramedic coverage. We had a BLS call out of RCMS and a BLS crew was staffed for training purposes.
	31	9:00 P - 9:00 A		3	1	1	1	2			