THE CITY OF ROCKFORD ILLINOIS, USA

Carrie Eklund
Central Services Manager
Finance Department

REQUEST FOR INFORMATION
EMS SERVICE
RFI NO: 311-F-023

3/17/11

Name of Bidding Firm: Paramedics Plus

Address 352 S. Glenwood City: Tyler State: TX Zip: 75702

Phone: 903-535-5802 Fax: 903-535-5813

E-Mail: dataylor@etmc.org

RFI Opening Time and Date **11:00 a.m., Local Time, Thursday, April 7, 2011**

Bids will be accepted until the specified opening time and date. Any bidder attempting to deliver after the opening time and date will be refused.

ABOUT THIS DOCUMENT

This document is a Request for Information. The issuance of this RFI is for informational purposes for staff only, and will not result in the award of a contract. The RFI process will often result in a separate RFP or Bid process, as once the City has sufficient information to develop specifications, the more formal processes are then used to create a contract. Participation in the RFI process is voluntary and does not give vendors an unfair advantage in the resulting procurement process.

PLEASE MARK THE RETURN SEALED ENVELOPE:

1. RFI Opening Date and Time
2. Title of RFI
3. RFI Number

RETURN INFORMATION TO:

City of Rockford
Central Services Manager
425 East State Street, 4th Floor
Rockford, Illinois 61104
Telephone: (815) 987-5560

BIDS SUBMITTED BY FASCSIMILE OR E-MAIL WILL NOT BE ACCEPTED

BID RESULTS:

Bid results may be obtained by telephone at (815) 987-5560, by fax at (800) 380-7174 or at www.rockfordil.gov

EQUAL EMPLOYMENT OPPORTUNITY
AFFIRMATIVE ACTION PLAN
STATEMENT OF POLICY

It is the policy of this company, Paramedics Plus to provide equal employment opportunity without regard to race, religion, color, national origin, handicap, age or sex through a program of positive action affecting all employees. In this program, our company carries out the requirements of Federal Executive orders 11246 and 11375, Civil Rights Act of 1964, Equal Employment Act of 1972, and all other applicable laws, and indicates its active support of the principle of equal opportunity in employment.

At present, 41 % of our work force are minorities and 25 % of our work force are females, and we will attempt to utilize minorities and females through a positive, continuing program in all jobs for which we contract in the future. Our company will utilize referrals from the City of Rockford's Diversity Procurement Officer for use of minorities and females regarding any future job vacancies.

It is also our intent to make efforts to purchase supplies or equipment from small business concerns located in the City of Rockford or counties of Winnebago or Boone and owned in substantial part (at least 51 per cent) by minorities or females.

Mike Gray is the official who will be responsible for implementing this policy statement.

Mike Gray will be designated as the Equal Opportunity Officer in our company, responsible for submission of all required equal employment opportunity documents.

In addition, no one is hereby authorized to sign payroll as well as this company's officers. (NOTE: If only officers will be authorized to sign payrolls, please fill in "No One" in this space.)

STATEMENT OF NONCOMPLIANCE

If the equal employment opportunity hearing committee determines that a contractor, subcontractor/leased operator of equipment or bidder is not in compliance with this chapter, (also known as Chapter 11, Article III the City of Rockford Equal Opportunity Employment Ordinance), the hearing committee shall issue and serve upon such person a written statement of noncompliance setting forth the manner in which it finds such person has violated this chapter, and imposing and/or requiring appropriate sanctions, including, but not limited to any and/or all of the following:

a. Denying, suspending or revoking qualifications, or declaring the contractor or subcontractor irresponsible and ineligible for future contracts or subcontracts until such time as the contractor or subcontractor shall demonstrate to the equal employment opportunity hearing committee that it is in compliance;

b. Withholding or delaying payment on the contractor or;

c. Suspending, avoiding or canceling contract work.

CERTIFICATION OF NON-SEGREGATED FACILITIES

The bidder certifies that he/she does not maintain or provide for his/her employees any segregated facilities at any of his/her establishments, and that he/she does not permit his/her employees to perform their services at any location, under his/her control, where segregated facilities are maintained. The bidder agrees that a breach of this certification will be a violation of the Equal Opportunity clause in any contract resulting from acceptance of this bid.

The bidder agrees that (except where he/she has obtained identical certification from proposed subcontractors/leased operators of equipment for specific time periods) he/she will obtain identical certification from proposed subcontractors/leased operators of equipment from the provisions of the Equal Opportunity clause, and that he/she will retain such certification in his/her files.

CONTRACTOR OR VENDOR WORKFORCE DATA FORM

BIDDERS NAME: Paramedics Plus

NUMBER OF ALL EMPLOYEES MUST BE ENTERED FOR EACH CATEGORY ---
(No Check Marks Or Bid Will Not Be Accepted)

	MALES					FEMALES				
ALL JOB CLASSIFICATIONS	**W**	**B**	**H**	**A**	**I**	**W**	**B**	**H**	**A**	**I**
SEE ATTACHED										

W - WHITE B - BLACK H – HISPANIC A - ASIAN OR PACIFIC ISLANDER I - AMERICAN INDIAN

ILLINOIS DEPARTMENT OF HUMAN RIGHTS CERTIFICATION

Our Illinois Department of Human Rights Number is: _____

Must Provide Expiration Date: _____

Count by Race	Company				
Ethnicity	East Texas Medical Center	Paramedics Plus, LLC - Florida	Paramedics Plus, LLC - Indiana	Paramedics Plus, LLC - Oklahoma	Grand Total
American Indian/Alaskan Native	1	2		1	4
Asian		3			3
Black or African American	17	22	1	1	41
Hispanic or Latino	29	32			61
Native Hawaiian or Other Pacific Islander		1			1
Not specified			97	586	683
Two or more races	1	2			3
White	590	479	23	54	1146
Grand Total	638	541	121	642	1942

Count by Gender	Company				
Gender	East Texas Medical Center	Paramedics Plus, LLC - Florida	Paramedics Plus, LLC - Indiana	Paramedics Plus, LLC - Oklahoma	Grand Total
F	158	107	33	197	495
M	480	434	88	445	1447
Grand Total	638	541	121	642	1942

Percentage of the Workforce	Female	Male
East Texas Medical Center	25%	75%
Paramedics Plus, LLC - Florida	20%	80%
Paramedics Plus, LLC - Indiana	27%	73%
Paramedics Plus, LLC - Oklahoma	31%	69%

CERTIFICATE OF NON-BARRED BIDDING

The undersigned certifies that it is not barred from bidding on this contract as a result of a conviction for the violation of State laws prohibiting bid rigging or bid rotating. The undersigned also certifies that current or prospective employees, contractors, and subcontractors/leased operators of equipment are not listed as Excluded Individuals/Entities with the US Government, as maintained by the US General Services Administration.

By signing below, the firm agrees that all information provided in the previous pages is accurate, and that if the firm below does not currently have a Department of Human Rights number they will apply for one within thirty days with the State of Illinois.

Authorized Signature

President
Title

Paramedics Plus
Firm

Our firm is a:

Minority Business Enterprise	____	City-Certified?	Yes	____	No	____
Women Business Enterprise	____	City Certified?	Yes	____	No	____
Neither	____					

(Revised 12/21/09)

2.1 About the Company

Paramedics Plus is a limited liability company formed in the State of Texas on June 22, 1998 and is the legal entity which will be solely responsible for providing services related to this contract. Paramedics Plus operates under several business names throughout the country to accommodate local systems, including Sunstar Paramedics in Florida, EMSA in Oklahoma and Three Rivers Ambulance Authority in Ft. Wayne, Indiana. In November of this year, Paramedics Plus will begin operations in Alameda County, California.

Paramedics Plus is an indirect subsidiary of East Texas Medical Center (ETMC) Regional Healthcare System based in Tyler, Texas and a direct, wholly-owned subsidiary of East Texas Medical Center Regional Health Services, Inc., also based in Tyler, Texas. ETMC Regional Healthcare System is a Texas non-member, non-stock, non-profit corporation organized under the Texas Non-Profit Corporation Act and is exempt from federal income taxation as a 501(C)(3) organization.

ETMC Regional Healthcare System operates over a dozen hospitals across eastern Texas, along with behavioral, rehabilitation, and home health care businesses. Its flagship Tyler location serves as the hub and referral center for the mini-systems located in more rural locations. The system also features numerous primary care and outpatient clinics throughout the region, in addition to offering the only Level 1 Trauma Center in East Texas.

Providing emergency and non-emergency medical transportation to the areas that they serve is the corner stone of the ETMC Regional Healthcare System. Paramedics Plus' sister company ETMC EMS, provides service to 17 counties in Texas serving an area of over 17,000 square miles. ETMC EMS provides high quality Mobile Intensive Care medical transportation to over 100 communities and in excess of 1.4 million people.

The financial interests owned by the parent organization in other related businesses include:

AccessDirect

Access Direct Platinum PPO Network serving 14 East Texas counties offers clients inpatient discounts ranging from 70-80% off billed charges. The physician discounts range from 40-50%. AccessDirect offers a nation-wide network 24 hours a day, 7 days a week with access to over 200,000 physicians, hospitals and ancillary providers. Quality healthcare, substantial savings

and freedom of choice are all components of AccessDirect's pledge to delivering high quality services expected of a national PPO.

Healthfirst TPA

Healthfirst TPA (HFTPA) is one of the fastest-growing Third Party Administrators in the healthcare industry. We are very proud of our client retention rate and have served some valued clients since 1983. Loyalty has been achieved through an unyielding commitment to our clients with service and advanced leadership. HFTPA currently has over 120,000 clients. Centralized Credentialing Services, Inc. Centralized Credentialing Services (CCS) provides centralized practitioner credentials verification and information management services. In addition, CCS furnishes the required verifications for clients to meet accrediting, state and federal requirements. CCS verifies credentials with primary sources according to the Joint Commission on Accreditation of Healthcare Organizations and the National Committee for Quality Assurance standards. CCS also maintains a comprehensive database of information for authorized clients.

MM Solutions

MM Solutions, Inc. is a medical management company with a proven track record. MM Solutions is staffed with registered nurses, certified case managers, and a Medical Director with years of experience in medical management. MM Solutions, Inc. provides a portfolio of services such as:

Pre-Certification
Inpatient Utilization Review
Outpatient Surgery Review
Case Management

HealthFirst Benefit Card

HealthFirst is a membership program offering healthcare savings to participants. Benefits include:

50% cost saving on acute inpatient hospital visits (up to $200 per visit)
Private room at semi-private rate
Advance notice of special events including health fairs and wellness programs

Free parking and gift shop discounts at the Tyler location

Paramedics Plus

Paramedics Plus provides emergency and non-emergency ambulance services, personnel and equipment based on a community's specific EMS needs. Each community is different, so we customize services to suit each. Paramedics Plus provides a qualified, dedicated paramedic and EMT workforce, dispatchers, and talented managers. Emergency Medical Services Authority Paramedics Plus's Oklahoma operation exemplifies our success in creating custom public-private partnerships. Paramedics Plus has provided ALS ambulance transports in Tulsa and Oklahoma City, as well as 13 other Oklahoma communities through the Emergency Medical Services Authority (EMSA), the exclusive emergency medical services provider for more than 1.4 million people in Central and Northeast Oklahoma.

ETMC Healthcare System EMS

ETMC EMS is one of the nation's largest rural ambulance services, as well as one of the most progressive and fastest growing. Based in Tyler, Texas for over 42 years, with locations throughout the East Texas region, ETMC EMS serves more than 17 counties covering nearly 17,000 square miles protecting more that 1.4 million lives. With our fleet of 116 ambulances and three helicopters, we respond to over 135,000 requests for service annually. The organization has established and operates one of the most sophisticated emergency communication systems using global-positioning satellite technology. The ETMC EMS service area represents a wide population density ranging from urban to rural and frontier. Using the latest technology we are able to bring strict response time reliability to the communities we serve.

Combined, ETMC and Paramedics Plus serve people under performance based contracts for communities of greater than 150 thousand and nearly 3.7 million persons including rural communities.

2.1.1 Company History

Paramedics Plus is a limited liability company formed in the State of Texas on June 22, 1998 and is the legal entity which is solely responsible for providing services related to this contract. Paramedics Plus operates under several business names throughout the country to accommodate local systems, including Sunstar Paramedics in Florida, EMSA in Oklahoma and Three Rivers Ambulance Authority in Ft. Wayne, Indiana. Our recently awarded contract in Alameda California will be branded as Paramedics Plus and will be identified by our distinctive logo and color schemes.

Paramedics Plus is a Texas limited liability company operating for more than a decade as an indirect subsidiary of East Texas Medical Center Regional Healthcare System (ETMCRHS) based in Tyler, Texas and a for-profit, wholly-owned subsidiary of East Texas Medical Center Regional Health Services, Inc.

ETMC operates ETMC-EMS which is the largest ambulance provider in the State of Texas. ETMC is a Texas non-member, non-stock, non-profit corporation organized under the Texas Non-profit Corporation Act and as a 501(c)(3) organization is exempt from federal income taxation.

In addition to ETMC-EMS and Paramedics Plus, East Texas Medical Center Regional Healthcare System owns or operates fifteen non-profit, tax-exempt hospitals in the East Texas area and provides other health care related activities through an array of free-standing clinics, as well as treatment and rehabilitation centers.

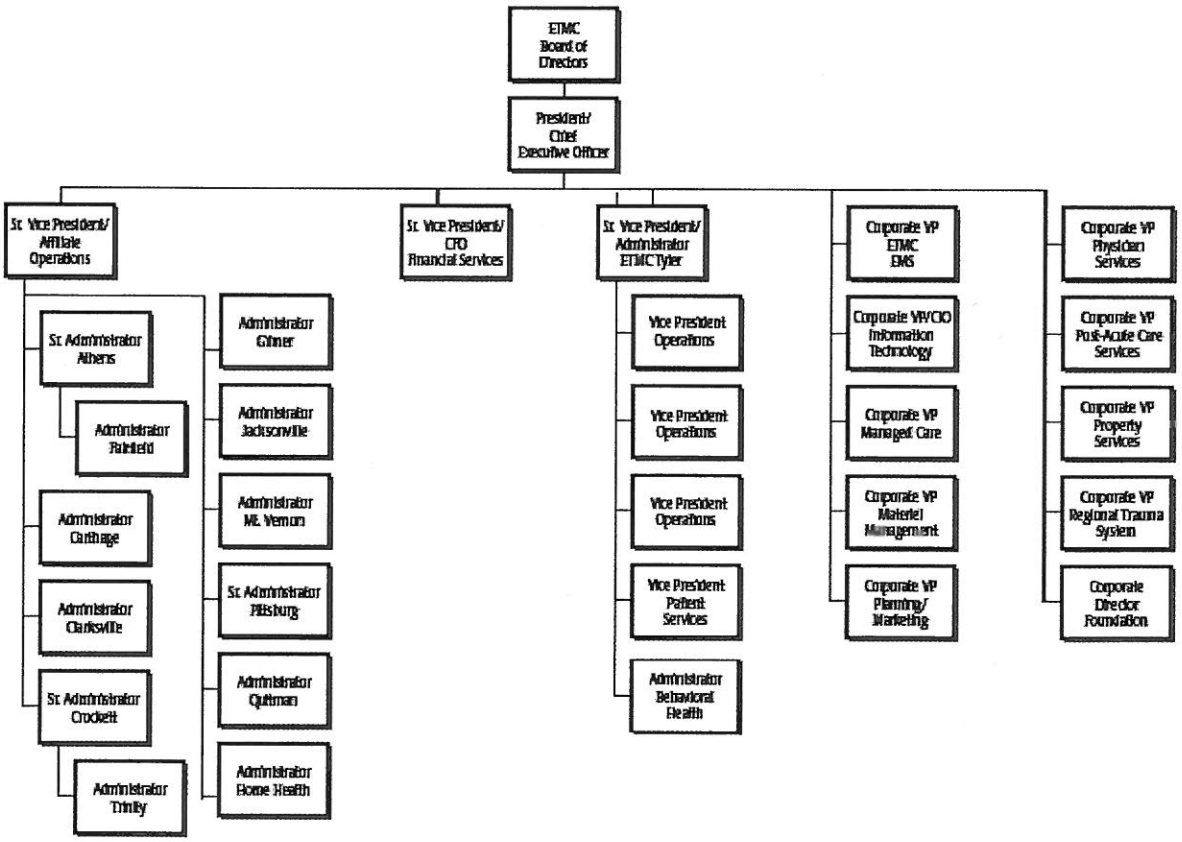
A three person Board of Managers guides the business affairs of Paramedics Plus. The Board of Managers consists of Elmer G. Ellis, Chairman of Paramedics Plus and also President and Chief Executive Officer of ETMC System; Anthony J. Myers, President of Paramedics Plus and Vice President and Chief Operating Officer of East Texas Medical Center Emergency Medical Service; and Byron Hale, Chief Financial Officer of Paramedics Plus and Senior Vice President and Chief Financial Officer of the ETMC System.

2.1.2 Organizational Chart

ETMC
East Texas Medical Center
Regional Healthcare System

Management Overview

East Texas Medical Center Regional Healthcare System



Elmer G. Ellis, FACHE
President/CEO, ETMC Regional Healthc
Revised September 2007

2.1.3 Location(s)

Paramedics Plus

Company Name: Emergency Medical Services Authority
Address: 1417 North Lansing
City, State, Zip Code: Tulsa, OK
Contact Person: H. Stephen Williamson
Telephone Number: (918) 596-3150
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport
Dates: November 1, 1998 to Present
Gross Revenue: $47,900,000.00

Company Name: Pinellas County Public Safety Services Division
Address: 12490 Ulmerton Road
City, State, Zip Code: Largo, Florida 33774
Contact Person: Richard (Dick) Williams, Executive Director
Telephone Number: (727) 582-2095
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport
Dates: October 2004 to Present
Gross Revenue: $31,644,622.00

Company Name: Three Rivers Ambulance Authority
Address: 525 Hayden
City, State, Zip Code: Ft. Wayne, Indiana 46802
Contact Person: Gary Booher
Telephone Number: (260) 420-6500
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport
Dates: July, 2009 to Present
Gross Revenue: $7,607,527.00

ETMC EMS

Company Name: East Texas Medical Center EMS
Address: 352 S. Glenwood
City, State, Zip Code: Tyler, Texas 75702
Contact Person: Anthony J. Myers, President

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Submitted by Paramedics Plus, L.L.C.

Telephone Number: 903-535-5802
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport for 17 Texas Counties covering 17,000 sq/miles
Dates: 1968 to Present
Gross Revenue: $70,400,000.00

2.1.4 Provide Information about contractual arrangements with other communities

Company Name: Emergency Medical Service Authority
Address: 1417 North Lansing
City, State, Zip Code: Tulsa, OK
Contact Person: H. Stephen Williamson
Telephone Number: (918) 596-3150
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport
Dates: November 1, 1998 to Present
Gross Revenue: $46,578,298.00

Company Name: Pinellas County Public Safety Services Division
Address: 12490 Ulmerton Road
City, State, Zip Code: Largo, Florida 33774
Contact Person: Richard (Dick) Williams, Executive Director
Telephone Number: (727) 582-2095
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport
Dates: October 2004 to Present
Gross Revenue: $31,644,622.00

Company Name: Three Rivers Ambulance Authority
Address: 525 Hayden
City, State, Zip Code: Ft. Wayne, Indiana 46802
Contact Person: Gary Booher
Telephone Number: (260) 420-6500
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport
Dates: July, 2009 to Present
Gross Revenue: $7,607,527.00

Company Name: East Texas Medical Center EMS
Address: 352 S. Glenwood
City, State, Zip Code: Tyler, Texas 75702
Contact Person: Anthony J. Myers, President
Telephone Number: 903-535-5802
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport for 17 Texas Counties covering 17,000 sq/miles
Dates: 1968 to Present
Gross Revenue: $67,621,938.00

2.1.5 Describe affiliations with local agencies (hospitals, institutions, etc.)

Currently Paramedics Plus has not established a business relationship with a particular hospital or institution in Rockford, Illinois. It is our understanding that Illinois requires EMS agencies to have an affiliation with a hospital in order to operate. Upon release of the Request for Proposals, Paramedics Plus will begin actively pursuing an affiliation with a sponsoring hospital.

2.1.6 Bonding and insurance capacity, including Best's rating of current insurer
Attached please find the requested information along with the certificate of insurance:

MPL/GL/Umbrella	Arch Specialty Ins. Co.	A, XV, (Excellent), $2B or more
Auto	Zurich American Ins. Co.	A+, XV (Superior), $2B or more
Worker's Comp.	United States Fire Ins. Co.	A, XIII, (Excellent), $1.25B to $1.5B

ACORD

CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER: LOCATION COMPANIES, LLC, 5847 SAN FELIPE, SUITE 320, HOUSTON TX 77057, 888-626-3539

INSURED: PARAMEDICS PLUS, L.L.C., 1526 EAST LAKE STREET, TYLER TX 75701

INSURERS AFFORDING COVERAGE
INSURER A: Arch Specialty Insurance Company — 21199
INSURER B: Zurich American Insurance Company — 16535
INSURER C: United States Fire Insurance Company — 21113
INSURER D:
INSURER E:
INSURER F:

COVERAGES — CERTIFICATE NUMBER: 3954041 — REVISION NUMBER: XXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	N	N	[illegible]	[illegible]	11/1/2011	EACH OCCURRENCE $ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) $ 100,000 MED EXP (Any one person) $ 5,000 PERSONAL & ADV INJURY $ 1,000,000 GENERAL AGGREGATE $ 5,000,000 PRODUCTS - COMP/OP AGG $ 5,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO-JECT LOC						$
B	AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS X HIRED AUTOS X NON-OWNED AUTOS	N	N	BAP[illegible]0159-00	11/1/2010	11/1/2011	COMBINED SINGLE LIMIT (Ea accident) $ 2,000,000 BODILY INJURY (Per person) $ XXXXXXX BODILY INJURY (Per accident) $ XXXXXXX PROPERTY DAMAGE (Per accident) $ XXXXXXX $ XXXXXXX
A	UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE X DED RETENTION $ 10,000	N	N	[illegible]0032-05	11/1/2010	11/1/2011	EACH OCCURRENCE $ 5,000,000 AGGREGATE $ 5,000,000 $ XXXXXXX
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N X (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	N	106-680713-8	11/1/2010	11/1/2011	X WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT $ 1,000,000 E.L. DISEASE - POLICY LIMIT $ 1,000,000 E.L. DISEASE - EA EMPLOYEE $ 1,000,000
A	PROFESSIONAL LIABILITY			[illegible]0032-05	11/1/2010	11/1/2011	[illegible]

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
CLAIMS MADE COVERAGE IF APPLICABLE TO PROFESSIONAL LIABILITY AND UMBRELLA POLICIES. RETROACTIVE DATE: PRIOR TO THE EFFECTIVE DATE OF THE INITIAL POLICY APPLIES.

CERTIFICATE HOLDER
3954041
"FOR INFORMATION PURPOSES ONLY"

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE

ACORD 25 (2010/05)
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2.1.7 Provide information on certifications and accreditations the firms holds.

Paramedics Plus is very knowledgeable of CAAS requirements and processes. Our Pinellas County, Florida operation (Sunstar EMS) earned re-accreditation in 2006 and 2009 since becoming a Paramedics Plus system in 2004. The Indiana operation was awarded CAAS accreditation in December 2009 just six months after Paramedics Plus assumed the contract. ETMC-EMS, the parent organization of Paramedics Plus earned accreditation in February, 2010 and the Oklahoma Operation of Paramedics Plus earned accreditation in August, 2010.

All of our operations are CAAS accredited.

As further evidence of Paramedics Plus' commitment to standards and accreditation, Sunstar Paramedics in Pinellas County is one of only two ambulance services in the world to hold accreditation from all three of the top accrediting agencies: CAAS, the Commission on Accreditation of Medical Transportation Systems and Accredited Center of Excellence by the National Academies of Emergency Dispatch. In addition, the Oklahoma operation is also accredited as a Center of Excellence by the National Academies of Emergency Dispatch.

Paramedics Plus Chief Operating Officer in Florida, Mark Postma, is the immediate past Chairman of the Board of CAAS and has served on the Board of Directors of the Commission for more than nine years. Paramedics Plus employees experienced in the accreditation requirements and process will be available to support the Rockford, Illinois operation should it choose to pursue accreditation.

2.1.8 Identify what state or Illinois EMS Region the vendor is with and what EMS Systems they are currently in. Identify what Region I EMS System they anticipate they will be in.

Currently Paramedics Plus does not operate in Illinois.

2.1.9 Provide a letter of "Good Standing" from their current EMS System.

Currently Paramedics Plus does not operate in Illinois but can offer letters of recommendation from the EMS Authorities where we currently serve if required. Below is the contact information from our existing contracts should the City wish to contact them regarding our performance.

Company Name	
Address	1417 North Lansing
City, State, Zip	Tulsa, OK 74106
Contact Person	H. Stephen Williamson
Telephone Number	(918) 596-3150
Service Provided	November 1, 1998 to Present
Dates/Type of Service	ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport

Company Name	
Address	12490 Ulmerton Road
City, State, Zip	Largo, Florida 33774
Contact Person	Richard (Dick) Williams, Executive Director
Telephone Number	(727) 582-2095
Service Provided	October 1, 2004 to Present
Dates/Type of Service	ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport

Company Name	
Address	525 Hayden Street
City, State, Zip	Fort Wayne, Indiana, 46802

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Submitted by Paramedics Plus, L.L.C.

Contact Person	Gary Booher
Telephone Number	260-420-6500 ext. 204
Service Provided	July 1, 2009 to Present
Dates/Type of Service	ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport

2.2 About the Staff

2.2.1 Training and certification of staff

Paramedics Plus will fully comply with Federal, State and County licensing, certification and training requirements. Using the Ninth Brain System, Paramedics Plus will create a tool set based on State of Illinois licensure requirements and the specific requirements of the City of Rockford, Illinois.

Paramedics Plus unique utilization of the Ninth Brain System, an online software package, is instrumental in assuring correct and continuous compliance with licensure and certification requirements and record retention.

Paramedics Plus will maintain copies of licenses and certifications. License, certification, and credential retention will be managed to meet the preferences of the City, whether hard copies or electronic versions. A "green" solution, the Ninth Brain System, allows each document to be uploaded and, in most cases, a paper copy is never generated. Paramedics Plus is experienced and competent in both types of record management.

In most cases, Paramedics Plus offers additional personnel qualifications and training beyond those required by the jurisdictions we serve.

Paramedics Plus is known for its passion for patient care and commitment to the education process. As an organization, Paramedics Plus creates a training experience that promotes a high level of clinical compassion, knowledge and competency. Paramedics Plus incorporates three distinct training phases during the course of employment. The first phase is Paramedics Plus unique orientation process, collectively known as the "Academy". This intense process, involving classroom and field training as well as written and hands on testing, produces confident, competent and capable medics who are familiar with the system, our processes and culture, and ready to care for patients.

This process includes education and training on a variety of subjects to assure that each unit is staffed with a properly trained and competent EMT and paramedic. Subjects include but are not limited to:

- American Heart Association Basic Life Support (BLS)
- American Heart Association Advanced Cardiac Life Support (ACLS)
- Basic EKG and 12 Lead EKG Training
- Pediatric Education for Pre-Hospital Providers (PEPP)
- International Trauma Life Support (ITLS)
- Emergency Vehicle Operations Course (EVOC or CEVO)

Academy education and training is conducted in a controlled environment utilizing a variety of learning methods. These methods provide a consistent platform for objective and measurable criteria to be applied to the individual employee while affording a safe mechanism for learning and practice. The learning methods utilized by Paramedics Plus include:

- Lecture
- Laboratory
- Role Playing
- Discussion
- On Line (CBT)
- Collaborative Learning
- Team Teaching

Many courses have an equal alternative "on line" course. Equal alternative methods are based upon local system design preferences and medical direction approval as well as State and County requirements. Paramedics Plus recognizes that some topics lend themselves better to one learning method over another. Paramedics Plus pairs the best learning method to the topic to maximize facilitate the learning experience.

There are a number of ways to validate employee competency, proficiency, or understanding conducted during the Academy. Each course has at least one method of determining successful completion. Courses geared to knowledge enrichment require no specific completion method. Evaluation methods include:

- Written Examination
- Practical Examination
- Employee Statement of Understanding
- Employee Knowledge Enrichment

All Paramedics Plus personnel licensed as a Paramedic will maintain AHA ACLS and International Trauma Life Support (ITLS) as well as Pre-hospital Pediatric Emergency Provider (PEPP) certifications at all times. Each employee will receive AHA ACLS, ITLS and PEPP training upon employment and bi-annually thereafter to ensure compliance and competency.

Paramedics Plus will train all ambulance personnel and supervisory staff in their respective roles and responsibilities under the City Multi-Casualty Incident Plan to prepare them to function in the medical portion of the Incident Command System. All field employees will, at minimum, complete National Incident Management System courses 100, 200, 700 within six months from the start of the contract. All newly-hired employees will receive this training during the orientation Academy. Supervisory personnel will also complete NIMS 300 within one year of promotion. All supervisory personnel, and any others involved in disaster planning, will complete the IS 800 course.

All personnel will also participate in an initial three hour class to review the ICS principles and their relationship to Medical Branch Operations, Group and Division Supervisors, START Triage and the functions of Triage, Treatment, Transport, and Staging. Other didactic education needed to ensure performance in the roles and responsibilities described by the MCIP will be included in this training as well. This review will be repeated on a two-year cycle and augmented by functional drills and exercise participation.

The most dangerous phase of any emergency response is emergency driving. All Paramedics Plus employees who operate emergency vehicles are required to complete our comprehensive driving program which incorporates the classroom portion of the Coaching the Emergency Vehicle Operator (Ambulance) course (CEVO) and the driving portion of the Emergency Vehicle Operators Course (EVOC). Further driving evaluation and training is conducted throughout the Field Training phase of probation. Throughout employment, employee driving is monitored in real-time by the Road Safety program installed on all Paramedics Plus ambulances in the City. Those employees who fail to meet driving standards are subject to retraining. Refreshed driver training is an annual course. Reports including data gathered through Road Safety are reviewed monthly to assure employees meet company driving standards.

Infection Control is an essential component of health care delivery and each Paramedics Plus employee is trained in the Infection Control Plan during the Academy and prior to reassignment in an area at risk for exposure.

Infection control measures range from elementary and proper hand-washing to high level disinfection used in surgical suites. The Paramedics Plus Infection Control Plan contains core elements designed to prevent or minimize occupational exposure and risk to employees, patients and the public.

These elements include:

- Education on the Infectious Process
- Disease Information
- Latex Allergy Guidelines
- Bio-Terrorism Guidelines
- Respiratory Protection
- Personal Protective Equipment
- Hand Washing
- Sharps
- Cleaning and Disinfecting
- Bio-hazardous waste disposal
- Scene Management
- Medical Surveillance
- Post-exposure infectious control

2.2.2 Include each individual's years of employment to the vendor and years licensed as an EMT-P

Since Paramedics Plus does not operate in the City of Rockford at the present time, this data is not available. However, if chosen as the successful proposer, this information will be made available to the City.

2.2.3 Provide letter of confirmation that all of vendor's EMS provider are in good standing within their EMS System and IDPH.

Since Paramedics Plus does not operate in the City of Rockford at the present time, this data is not available. However, if chosen as the successful proposer, this information will be made available to the City.

2.3 About the Equipment

2.3.1 Identify Ambulance vehicles currently used in similar markets (e.g., make model, year, and equipment).

Selection of the right ambulance fleet is an essential component to a successful EMS operation. Reliability, safety, functionality, ease of use, ease of maintenance, crew comfort, efficiency and performance were considered when choosing the American Emergency Vehicle (AEV) Type III ambulance unit for use by Paramedics Plus operations. These units provide a professional, modern and technologically–supported environment for patients and medics.

Paramedics Plus will provide a fleet Type III ambulance units. Units will be purchased from AEV, a company with state-of-the-art manufacturing techniques, including rigid process controls and aggressive quality control procedures. The AEV vehicle selected, the Trauma Hawk, Type III, G-3500, is powered by a 6.6 liter Duramax 6600 Turbo diesel engine. The ambulance module, DR-92, dimensions 145" x 92" x 66" interior head room provides a comfortable working area and ample room in which to deliver a full range of pre-hospital care.

All ambulance units will meet the 2010 EPA diesel emission standards.

Paramedics Plus will provide clean, dependable and well-maintained ambulances. Paramedics Plus currently utilizes a fleet of 293 ambulance units throughout its service areas in Oklahoma, Indiana, Florida and its sister system in Texas. In November of this year that number will grow to be in excess of 350.

Paramedics Plus combined with its sister organization, East Texas Medical Center EMS, currently utilize a fleet of 89 Type I ambulance units in Oklahoma, 116 Type III ambulances in Texas, 14 Type III ambulances in Indiana, and 64 Type III and 10 Type II ambulances in Florida. Throughout this system, an aggressive, creative, and efficient maintenance program supports a fleet which achieves the highest standards of EMS reliability. The Paramedics Plus preventative maintenance program is designed to minimize vehicle failures by identifying and correcting problems prior to malfunction. An aggressive maintenance plan changes everything in pairs or multiples when problems do occur.

2.3.2 Condition of current equipment and capital replacement policy

Should Paramedics Plus be the successful proposer, all equipment and units will be purchased new and will be maintained and replaced at manufacturers recommended intervals.

All emergency fleet vehicles will be 2011 or current model year ambulances at the time of the contract start date, will be of Type III modular construction, will have the capability to center-mount the gurney to the floor, and will meet all Federal Specification KKK-A1822E and subsequent revisions, and be certified by the manufacturer to meet the specifications in effect at the date of manufacture.

Paramedics Plus utilizes a five year replacement schedule on ambulance units; however, should a unit prove to be unreliable, it may be replaced at any time.

2.3.3 Included in appendix A is statistical information on call volume in the City. Please provide information on the firm's deployment strategy in similar markets.

Paramedics Plus resource commitment and deployment strategies will allow the system to meet or exceed any response time requirements established in a formal Request for Proposals. For the Rockford, Illinois operation, we will use the most sophisticated technology currently available in the EMS industry to continually fine tune the system for optimal performance. The technology that Paramedics Plus will deploy is the MARVLIS Mobile Area Routing & Vehicle Location Information System from Bradshaw Consulting Services. This technology monitors and recommends re-deployment of resources based on demand for services and geographical coverage needs.

Paramedics Plus will continually adjust the SSP to optimize performance. Continued analysis, maintenance and fine-tuning of the SSP are essential components of our dedicated commitment to response-time performance. Paramedics Plus will work closely with our First Response partners, hospitals and community stakeholders to develop the SSP.

The two main components of the SSP are the analysis of the data provided by the City and creation of a SSP utilizing data analysis results. The multi-step process utilized by our Leadership Team in developing the SSP is provided below.

Step 1: Data Analysis

Paramedics Plus will utilize the MARVLIS Demand Monitor to provide an historical geographic view of call demand. The system automatically queries the CAD system for a given time period to produce a map of both incident locations and demand densities for each hour of every day. This analysis will also be confirmed through the use of traditional demand analysis methodology. A typical demand analysis would include the review of the previous 20 weeks of historical 9-1-1 calls to create a 168-hour chart based on calls received into the City's PSAP centers. This 168-hour chart is used to develop call demand graphs illustrating the maximum number of calls received each hour of the day and each day of the week for the 20 weeks analyzed.

Step 2: Geographical Analysis

Once the 9-1-1 call demand pattern is determined, data is imported into the MARVLIS Deployment Planner which is used to create a SSP that most efficiently covers the demand for the specified area. Using the results from the Dynamic Demand Monitor to help visualize the areas of demand at a given time of day and day of week, the Deployment Planner allows the System Status Manager to place vehicles on the map and immediately see the area of coverage provided for the required response times. The System Status Manager can then move the vehicles around until the best coverage for a given level of units available is reached.

Step 3: Geographical Ambulance Deployment

Once the call demand has been identified, a deployment plan is built in the MARVLIS Deployment Planner. It is important that Paramedics Plus receive input from management, field employees, dispatch employees and the First Responder Organizations when determining appropriate posting locations.

Step 4: Creation of Ambulance Work Schedules

Once the first three steps are complete, field work schedules are developed. Paramedics Plus's initial field schedules are developed using Zoll's Resource Planner (formerly Quick Response Deployment Planner) from ISERA. Run data is analyzed using an average peak calculation to determine staffing levels that will allow us to meet and exceed the response time requirements specified in the Request for Proposals. Work schedules are enhanced with input from both management and field employees to ensure call demands are adequately covered, accommodate employees' needs, and minimize crew fatigue.

Step 5: Completed SSP

Because our approach to developing and revising our System Status Plans have been successful when combined with a management team that is focused on response time performance, Paramedics Plus is confident this tested approach will continue to achieve superior response time performance.

Step 6: Plan Refinements

Paramedics Plus is an industry leader in fine-tuning of the SSP. That expertise is evidenced by our ability to consistently meet response-time standards in all of our contracts. We receive frequent requests to share our knowledge at professional conferences and with individual

systems struggling with response-time performance. Over time, Paramedics Plus has developed a process which allows for improved iterations of our SSPs to achieve a high degree of response-time reliability which directly benefits our patients and customers.

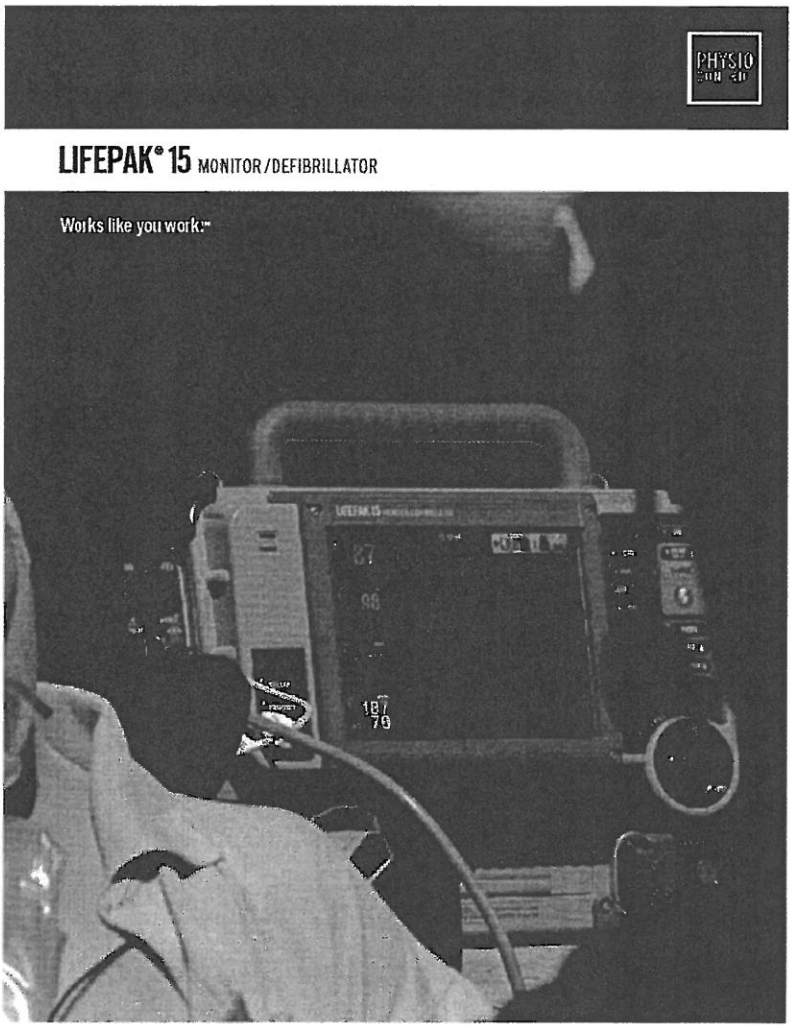
2.3.4 Identify and list all equipment that is maintained and is part of every ambulances inventory

Paramedics Plus operates in many different states and communities across the United States and each system has its own specific set of equipment that is required to be carried on each ambulance. For this reason Paramedics Plus does not have a "standard" list of equipment carried on each ambulance.

Paramedics Plus commits that each ambulance will be equipped in accordance with all Federal, state and local laws and carry the equipment and supplies required by the local medical community.

2.3.5 Confirm that every cardiac monitor that is carried by the vendor is capable of taking and transmitting a 12-lead analysis to every local hospital.

Paramedics Plus utilizes the Physio-Control Life Pak -15 which includes the capabilities of transmitting a 12-lead cardiogram to each local hospital equipped to receive them.



2.3.6 Outline the vendor's current policy on providing equipment and medication replacement to fire apparatus companies used on patients being transported by the vendor.

Paramedics Plus will exchange on a one-for one basis, all basic and advanced expendable medical supplies and equipment used by Fire First Responder agencies in connection with delivery of emergency medical care and treatment except for medical drugs which is prohibited by Federal Law.

2.4 About the Service

2.4.1 Identify experience providing Ambulance services as well as the contractual method employed with each client listed.

Company Name: Emergency Medical Services Authority
Address: 1417 North Lansing
City, State, Zip Code: Tulsa, OK
Contact Person: H. Stephen Williamson
Telephone Number: (918) 596-3150
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport
Dates: November 1, 1998 to Present
Contractual Method: Public Utility Model

Company Name: Pinellas County Public Safety Services Division
Address: 12490 Ulmerton Road
City, State, Zip Code: Largo, Florida 33774
Contact Person: Richard (Dick) Williams, Executive Director
Telephone Number: (727) 582-2095
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport
Dates: October 2004 to Present
Contractual Method: Public Utility Model

Company Name: Three Rivers Ambulance Authority
Address: 525 Hayden
City, State, Zip Code: Ft. Wayne, Indiana 46802
Contact Person: Gary Booher
Telephone Number: (260) 420-6500
Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport
Dates: July, 2009 to Present
Contractual Method: Public Utility Model

Company Name: East Texas Medical Center EMS
Address: 352 S. Glenwood
City, State, Zip Code: Tyler, Texas 75702
Contact Person: Anthony J. Myers, President
Telephone Number: 903-535-5802

City of Rockford, IL - Request for Information EMS Service 311-F-023

Submitted by Paramedics Plus, L.L.C.

Service Provided: ALS 9-1-1 Emergency Medical Transport and Non-Emergency Transport for 17 Texas Counties covering 17,000 sq/miles

Dates: 1968 to Present

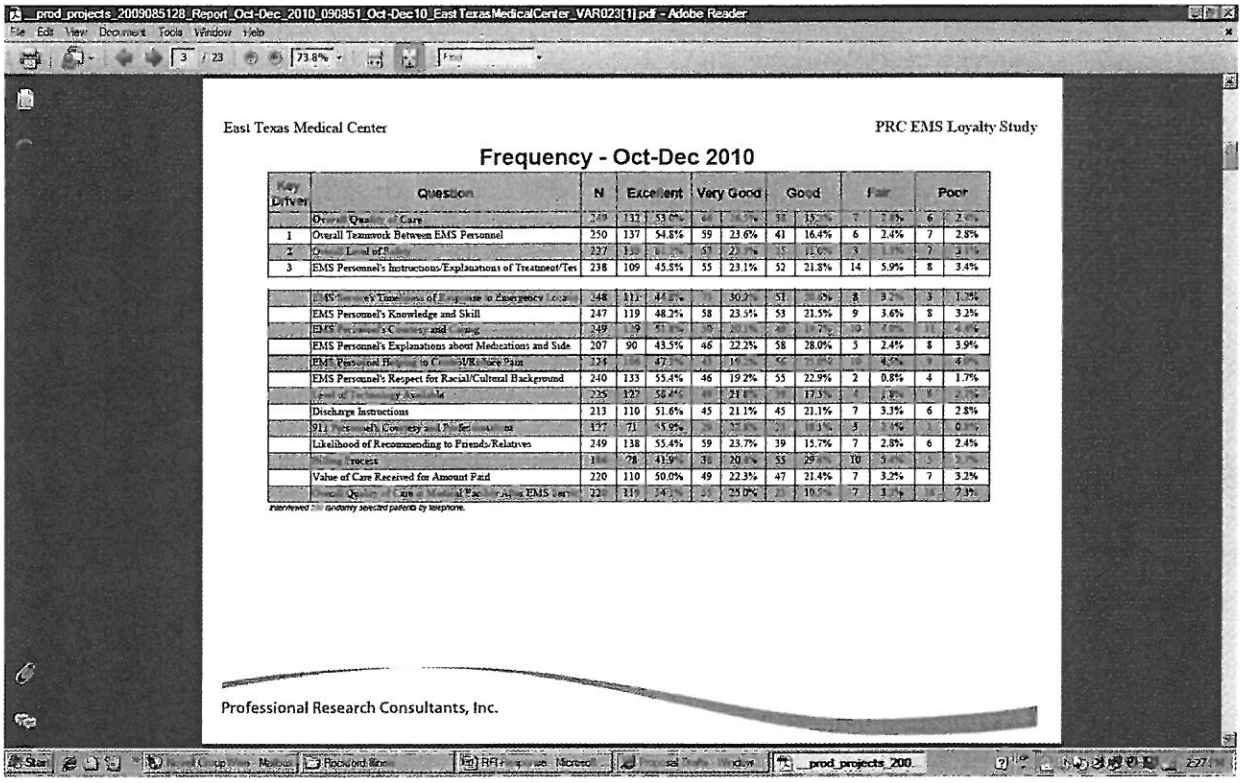
Contractual Method: Franchise Model

2.4.2 If available, provide customer survey results for vendor's last thee (3) years of service.

Paramedics Plus utilizes a professional resource, with a national reputation in healthcare research, to conduct patient surveys. Each month, a statistically significant sample of patients will be surveyed to determine patient perceptions of the EMS experience. Results will also allow Paramedic Plus operations to be benchmarked against satisfaction scores of other healthcare providers and lastly, the data allows Paramedics Plus to determine the specific aspects of patient care that are most important to our patients.

Survey methodology varies by operations and while some use a telephone survey conducted by an outside source, another sends mail surveys developed through focus group interviews with former patients. Regardless of the methodology used, results are summarized and provided to the local oversight agency and shared with employees through newsletters, team meetings, continuing education classes and scorecards.

These reports are rather large so in the interest of space, only a sampling is included below. Full reports are available if requested.



East Texas Medical Center PRC EMS Loyalty Study

Frequency - Oct-Dec 2010

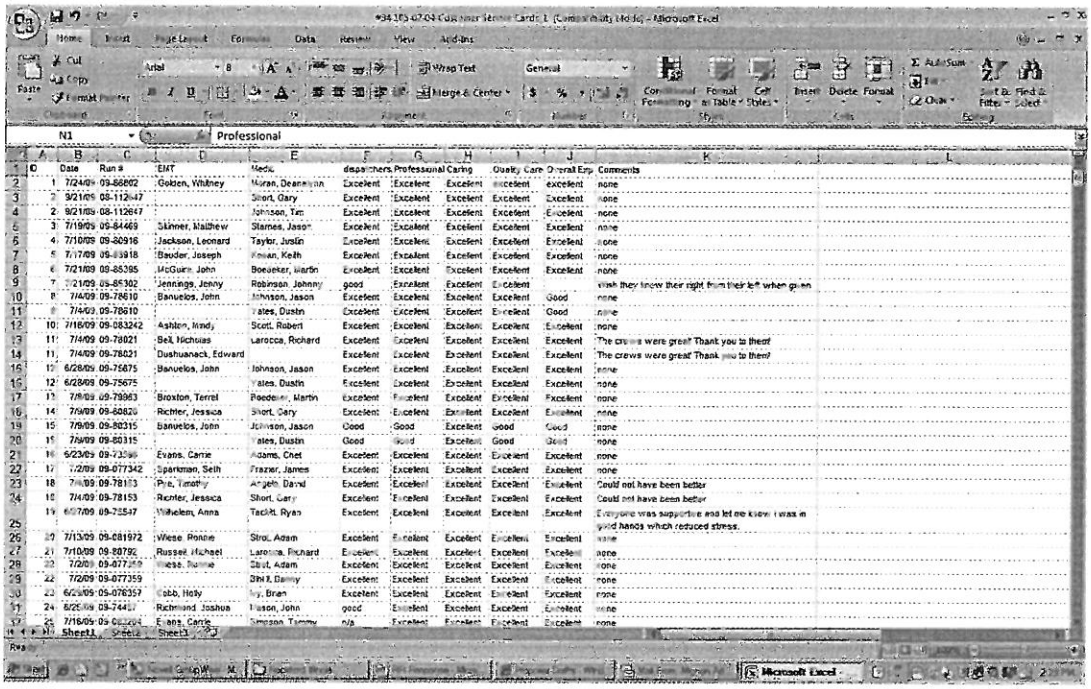
Key Driver	Question	N	Excellent		Very Good		Good		Fair		Poor	
	Overall Quality of Care	249	132	53.0%	[illegible]	[illegible]	38	15.3%	7	[illegible]	6	[illegible]
1	Overall Teamwork Between EMS Personnel	250	137	54.8%	59	23.6%	41	16.4%	6	2.4%	7	2.8%
2	Overall Level of Safety	227	130	[illegible]	53	[illegible]	25	[illegible]	3	[illegible]	7	[illegible]
3	EMS Personnel's Instructions/Explanations of Treatment/Tes	238	109	45.8%	55	23.1%	52	21.8%	14	5.9%	8	3.4%
	EMS Personnel's Time[illegible] of Response to Emergency Locat	248	111	[illegible]	[illegible]	30.2%	51	[illegible]	8	[illegible]	3	[illegible]
	EMS Personnel's Knowledge and Skill	247	119	48.2%	58	23.5%	53	21.5%	9	3.6%	8	3.2%
	EMS Personnel's Courtesy and Caring	249	119	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
	EMS Personnel's Explanations about Medications and Side	207	90	43.5%	46	22.2%	58	28.0%	5	2.4%	8	3.9%
	EMS Personnel Helping to Control/Reduce Pain	224	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
	EMS Personnel's Respect for Racial/Cultural Background	240	133	55.4%	46	19.2%	55	22.9%	2	0.8%	4	1.7%
	Level of Technology Available	225	127	[illegible]	[illegible]	[illegible]	[illegible]	17.3%	[illegible]	[illegible]	[illegible]	[illegible]
	Discharge Instructions	213	110	51.6%	45	21.1%	45	21.1%	7	3.3%	6	2.8%
	911 Personnel's Courtesy and Professionalism	127	71	55.9%	[illegible]	[illegible]	[illegible]	[illegible]	5	[illegible]	[illegible]	[illegible]
	Likelihood of Recommending to Friends/Relatives	249	138	55.4%	59	23.7%	39	15.7%	7	2.8%	6	2.4%
	Billing Process	186	78	41.9%	38	20.4%	55	[illegible]	10	[illegible]	[illegible]	[illegible]
	Value of Care Received for Amount Paid	220	110	50.0%	49	22.3%	47	21.4%	7	3.2%	7	3.2%
	Overall Quality of Care at Medical Facility After EMS Serv	22[illegible]	119	[illegible]	[illegible]	25.0%	[illegible]	[illegible]	7	[illegible]	[illegible]	[illegible]

Interviewed [illegible] randomly selected patients by telephone.

Professional Research Consultants, Inc.

City of Rockford, IL - Request for Information EMS Service 311-F-023

Submitted by Paramedics Plus, L.L.C.



ID	Date	Run #	EMT	Medic	dispatchers Professional	Caring	Quality Care	Overall Exp	Comments
1	7/24/09	09-86802	Golden, Whitney	Moran, Deannagan	Excellent	Excellent	excellent	excellent	none
2	9/21/09	08-112447		Short, Gary	Excellent	Excellent	Excellent	Excellent	none
2	9/21/09	08-112847		Johnson, Tim	Excellent	Excellent	Excellent	Excellent	none
3	7/19/09	09-84469	Skinner, Matthew	Starnes, Jason	Excellent	Excellent	Excellent	Excellent	none
4	7/10/09	09-80916	Jackson, Leonard	Taylor, Justin	Excellent	Excellent	Excellent	Excellent	none
5	7/17/09	09-83918	Bauder, Joseph	Kwan, Keith	Excellent	Excellent	Excellent	Excellent	none
6	7/21/09	09-86395	McGuire, John	Boedeker, Martin	Excellent	Excellent	Excellent	Excellent	none
7	7/21/09	09-86302	Jennings, Jenny	Robinson, Johnny	good	Excellent	Excellent	Excellent	wish they know their right from their left when given
8	7/4/09	09-78610	Banuelos, John	Johnson, Jason	Excellent	Excellent	Excellent	Good	none
9	7/4/09	09-78610		Yates, Dustin	Excellent	Excellent	Excellent	Excellent	Good	none
10	7/16/09	09-083242	Ashton, Mindy	Scott, Robert	Excellent	Excellent	Excellent	Excellent	none
11	7/4/09	09-78021	Bell, Nicholas	Larocca, Richard	Excellent	Excellent	Excellent	Excellent	Excellent	The crews were great! Thank you to them!
11	7/4/09	09-78021	Dushuanack, Edward		Excellent	Excellent	Excellent	Excellent	Excellent	The crews were great! Thank you to them!
12	6/28/09	09-75675	Banuelos, John	Johnson, Jason	Excellent	Excellent	Excellent	Excellent	Excellent	none
12	6/28/09	09-75675		Yates, Dustin	Excellent	Excellent	Excellent	Excellent	Excellent	none
13	7/9/09	09-79983	Broxton, Terrel	Boedeker, Martin	Excellent	Excellent	Excellent	Excellent	Excellent	none
14	7/9/09	09-80820	Richter, Jessica	Short, Gary	Excellent	Excellent	Excellent	Excellent	Excellent	none
15	7/9/09	09-80315	Banuelos, John	Johnson, Jason	Good	Good	Excellent	Good	Good	none
15	7/9/09	09-80315		Yates, Dustin	Good	Good	Excellent	Good	Good	none
16	6/23/09	09-73589	Evans, Carrie	Adams, Chet	Excellent	Excellent	Excellent	Excellent	Excellent	none
17	7/2/09	09-077342	Sparkman, Seth	Frazier, James	Excellent	Excellent	Excellent	Excellent	Excellent	none
18	7/4/09	09-78153	Pyle, Timothy	Angelo, David	Excellent	Excellent	Excellent	Excellent	Excellent	Could not have been better
18	7/4/09	09-78153	Richter, Jessica	Short, Gary	Excellent	Excellent	Excellent	Excellent	Excellent	Could not have been better
19	6/27/09	09-72547	Wilhelem, Anna	Tackitt, Ryan	Excellent	Excellent	Excellent	Excellent	Excellent	Everyone was supportive and let me know I was in good hands which reduced stress.
20	7/13/09	09-081972	Wiese, Ronnie	Strot, Adam	Excellent	Excellent	Excellent	Excellent	Excellent	none
21	7/10/09	09-80792	Russell, Michael	Larocca, Richard	Excellent	Excellent	Excellent	Excellent	Excellent	none
22	7/2/09	09-077359	Wiese, Ronnie	Strot, Adam	Excellent	Excellent	Excellent	Excellent	Excellent	none
22	7/2/09	09-077359		Shirk, Danny	Excellent	Excellent	Excellent	Excellent	Excellent	none
23	6/28/09	09-076357	Cobb, Holly	Ivy, Brian	Excellent	Excellent	Excellent	Excellent	Excellent	none
24	6/26/09	09-74481	Richmond, Joshua	Tuson, John	good	Excellent	Excellent	Excellent	Excellent	none
25	7/16/09	09-083004	Evans, Carrie	Simpson, Tommy	n/a	Excellent	Excellent	Excellent	Excellent	none

The Emergency Medical Services Authority utilizes the services of Professional Research Consultants to gather and analyze patient satisfaction in the Oklahoma service area. Each month PRC conducts telephone surveys in each of the two Oklahoma divisions. The association with PRC began in FY2009.

The results of the surveys to date show—

87.7% of respondents rate the overall quality of care as Excellent or Very Good while only 1% of respondents rate the quality of care as Poor.
80.4% of respondents rate the timeliness of response as Excellent or Very Good.
81.4% of respondents rate the knowledge and skill of medics as Excellent or Very Good.
81.5% of respondents rate the courtesy and caring attitude as Excellent or Very Good.
75.5% of respondents rate the instructions or explanations provided as Excellent or Very Good.
74.6% of respondents rate medics helping to control or reduce pain as Excellent or Very Good.
83.8% of respondents rate respect for racial or cultural background as Excellent or Very Good.
86.4% of respondents rate the courtesy and professionalism of 911 telephone contact as Excellent or Very Good.

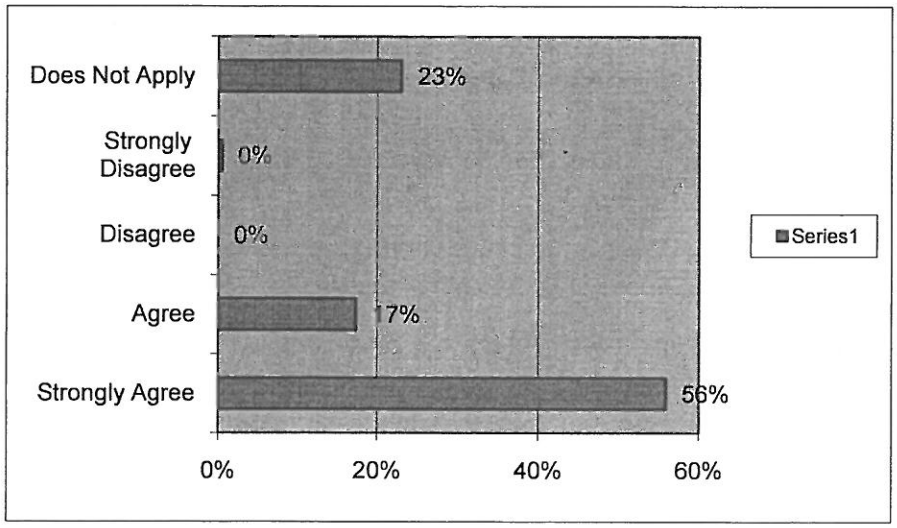
City of Rockford, IL - Request for Information EMS Service 311-F-023

Submitted by Paramedics Plus, L.L.C.

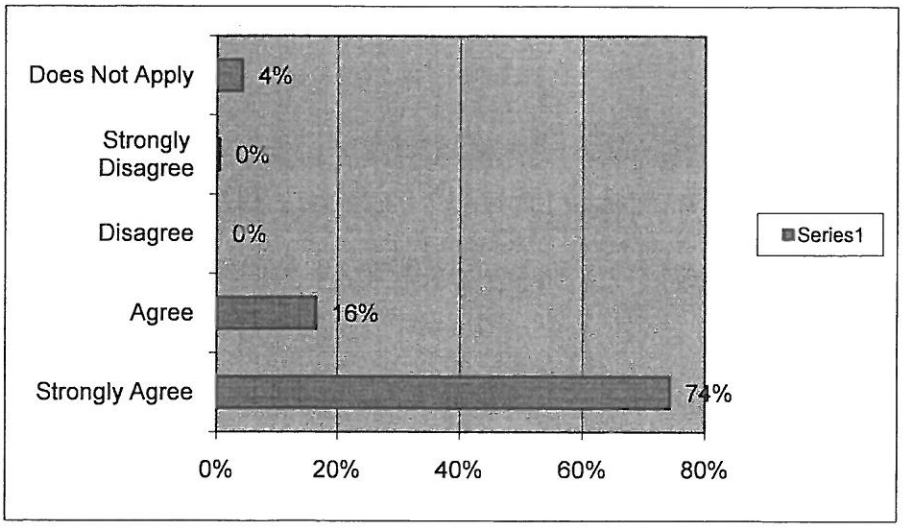
The Paramedics Plus operating as the Three Rivers Ambulance Authority in Ft. Wayne, Indiana utilizes an in-house customer survey process. Samplings of the results are shown below.

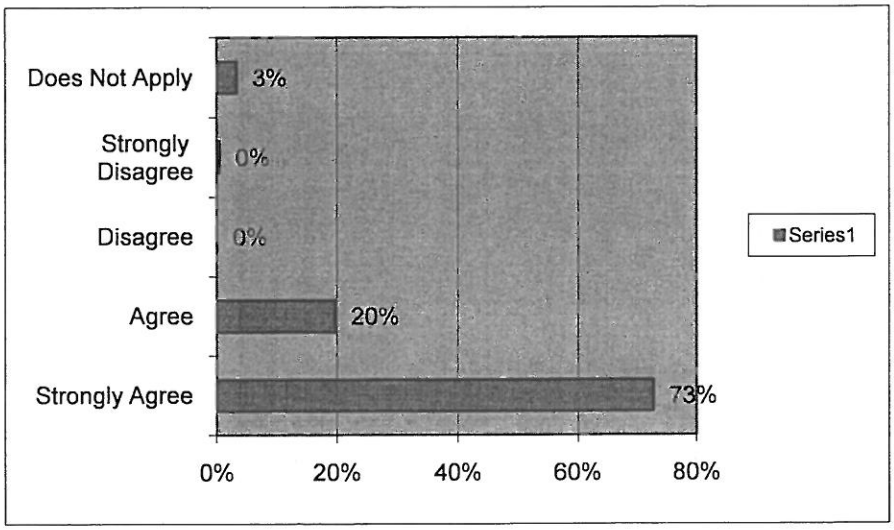
Total cards received 213 Total cards mailed 885

When I called for service, the TRAA dispatcher on the phone was courteous and polite.

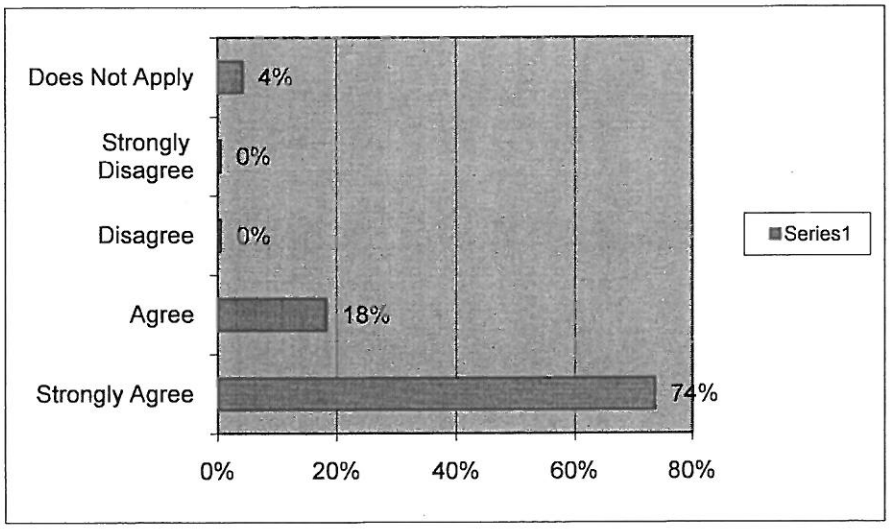


I felt that I received excellent care from the TRAA crew.





The TRAA crew acted in a compassionate and respectful manner.



2.4.3 Vendor must confirm that a Quality Assurance/Quality Improvement program is being utilized, and provide information on program details.

The Paramedics Plus approach to clinical quality improvement (CQI) begins with a vision of balanced results, a corporate culture for locally lead improvement, an academically prepared Leadership Team and a set of benchmarks, tools and processes crafted while serving communities with some of the most stringent quality standards in the world. We will bring our proven processes based on Baldrige criteria using statistical process control from Paramedics Plus operations as a foundation, and collaborate with the City of Rockford, Illinois and the EMS Medical Director to design a program to maximize local talents and individuality.

The effectiveness of the unique Paramedics Plus approach is proven by world-class cardiac arrest survival measures, superb response time performance, and an unprecedented commitment to fulfilling promises made in proposals and below average cost to consumers.

Paramedics Plus has structured a world-class, industry-standard clinical management philosophy that embraces the core concepts and recommendations from the National Highway Traffic Safety's ground-breaking work, *EMS Agenda for the Future,* and the Institute of Medicine reports: *Crossing the Quality Chasm: A New Health System for the 21st Century* and *Emergency Medical Services: At the Crossroads* as well as concepts and processes developed from actually running some of the most highly acclaimed EMS systems in the country.

Our approach to quality management and quality improvement in the City of Rockford will be to adopt the best practices from other Paramedics Plus operations as well as other EMS leaders across the nation. Our overall Quality Management System will be based on the Baldrige criteria as well as the Paramedics Plus experience in producing award winning and widely recognized EMS CQI programs.

The purpose of any EMS system is to reduce pain and suffering and positively affect the community's morbidity and mortality from out-of-hospital medical emergencies. Since resources are finite, a great EMS system that uses resources more efficiently to achieve results is a better system.

Paramedics Plus management philosophy is to strive for both maximum results and minimal cost. To achieve this balance, we have developed a Leadership Team with advanced academic and business preparation as well as practical experience managing high performance EMS systems. We have adopted and adapted principles of operations management from industry as well as scientific evidence from clinical studies to identify practices with the best chance of producing superior clinical results and cost effectiveness. Innovation is enhanced by focusing our investment into technology, procedures and education that have demonstrable value.

Paramedics Plus understands the importance of evidence- based medicine and its role with improving patient outcomes. The Senior Leadership team includes Rodney Dyche, Esq. who currently serves as the Director of Corporate Training. He has significant experience with pre-hospital care and conducting studies that are both peer-reviewed and non peer-reviewed.

Paramedics Plus adopted the Baldrige National Quality criteria as its Quality Management System in 2006. This system was initially adopted in the Pinellas County operation and is being further deployed across our other locations. The Baldrige categories are linked to create an integrated management system that enables the organization to focus systematically on performance excellence and continuous improvement.

The framework used to define a total quality system consists of seven categories:

1) leadership

2) strategic planning

3) customer and market focus

4) measurement, analysis, and knowledge management

5) workforce focus

6) process management, and

7) results.

2.4.4 Describe service provision approach (e.g. patrol, stationary).

Paramedics Plus is an industry leader in the utilization of System Status Management and the fine-tuning of a System Status Plan. That expertise is evidenced by our ability to consistently meet response-time standards in all of our contracts. We receive frequent requests to share our knowledge at professional conferences and with individual systems struggling with response-time performance. Over time, Paramedics Plus has developed a process which allows for improved iterations of our System Status Plans to achieve a high degree of response-time reliability which directly benefits our patients and customers.

Our approach to developing and revising System Status Plans has been successful when combined with a management team that is focused on response time performance through daily PULSE meetings,

Paramedics Plus employs an innovative approach to monitoring and improving the overall performance of the system. Our local teams meet each weekday in special meetings called PULSE, or Performance Utilization Late-call System Evaluation meetings.

The PULSE team is made up of Operations, Communications, Fleet, Materials, Scheduling and Education managers. During these daily meetings, the team analyzes the previous day's performance including scheduling, special events, late call analysis, head count, lost unit hours, crews off late and overall performance. The team also looks ahead one week to consider available staffing compared to unit hour goals and current production. Matching of fleet and equipment availability with planned unit hours is also studied. PULSE meetings result in improved situational awareness for all departments, a daily renewed focus on the operational measures impacting system performance including a concentrated focus on response-time performance and an exceptional working relationship between all departments.

2.4.5 Describe contingency plan and any arrangements with public or private providers for emergency services.

Paramedics Plus has a long and successful history of collaboration with other agencies involving mutual aid. We are confident in our ability to develop a strong relationship with agencies in the Rockford, Illinois service area.

Paramedics Plus commits to secure Mutual Aid Agreements with other local EMS agencies and First Response Organizations whenever possible. In addition, Paramedics Plus will work with other ambulance agencies in the area in case of a catastrophic emergency.

2.4.6 The city will require two (2) paramedics on the ambulance at all times. Describe current staffing strategy.

Paramedics Plus will meet or exceed the licensure, certification and ongoing performance standards required by the City of Rockford, Illinois.

With patients at the heart of every Paramedics Plus operation, the providers that deliver direct patient care are the organization's most important asset; Paramedics Plus recruits only qualified providers who are passionate about patient care.

2.4.7 Describe current billing practice for commercial and no-pay patients (How do you collect and to what extent.)

Paramedics Plus shall make no attempts to collect its fees at the time of service.

The billing system utilized by Paramedics Plus is configured to provide access to data at any point in the billing process, resulting in greater transparency and accountability. Billing and collection services are segmented into distinct processes from initial PCR Creation to Reporting - with each step guided by Account Management Teams. Every patient transport is "touched" during each phase of our process and always with the underlying goal of achieving maximum compliant reimbursement.

Specifics of the five step process include:

Billing Cycle Day 1-7: During this process transports are captured, coded, audited for regulatory compliance PRIOR to initial billing to ensure "clean claims" are billed. Patient insurance and demographic sweeps are applied to identify coverage wherever it exists.

Billing Cycle Day 2-14: Claims are submitted electronically or on paper within 48 hours of receipt of complete information. Currently, 75% of all claims are billed electronically, whether Medicare, Medicaid or commercial insurer.

Billing Cycle Week 2-8: Payments are posted, and all patient and insurance correspondence is reviewed and accounts are updated within 24 hours of receipt to ensure that revenue is realized as efficiently as possible.

Billing Cycle Week 3-16: Accounts are resolved through secondary and tertiary payer billing within one week of primary payment, timely processing of refunds and review of all payments received to ensure they are accurately applied. Finally, all aged accounts are proactively reviewed and worked through the appeals process as appropriate.

Reporting: Available 24/7/365 of the Billing Cycle: Our Business Intelligence reporting tools provide real-time access to all information entered into the billing system. Every PCR, patient account, call statistic, demographic resource, financial information, etc., is continuously available via any internet capable computer which allows monitoring of every part of the billing process.

Patient statements will list all procedures and supplies employed.

It is the goal of Paramedics Plus that every patient and third party call be professionally and courteously handled with minimum wait times. Any patient can access customer service representatives using a designated toll free number which maintains active customer service hours from 8 a.m. to 5 p.m. daily, excluding holidays, and utilizes an afterhours messaging system 24/7 which is answered the next business day. Multilingual customer service representatives will assist callers in the following languages: English, Spanish, French, German, Vietnamese, Cantonese, Burmese, Hindi, and Tagalog. Information will be available to callers on all aspects of the billing cycle.

Collection at time of service - At no time, does Paramedics Plus ever attempt to collect from patients at the time of service. We pride ourselves in our patient-centric approach. Billing and collection, although necessary to support operations, take a backseat to patient care.

All functions of the billing and collection process will be handled in a professional and courteous manner. With that in mind, some key Paramedics Plus policies and practices regarding billing and collections follow:

Charity assistance – Compassionate patient care is the primary focus of all ETMC companies. This compassionate focus extends to our collection policies. All ETMC entities operate under a single charity policy. Charity care will be provided to patients without regard to age, sex, race, creed, color, or national origin and who are classified as financially or medically indigent after submitting an application for charity assistance.

Uninsured patient discount – In certain cases patients may not qualify for charity assistance. Nevertheless, large healthcare bills can be a strain on individuals without health insurance. For this reason, a discount from retail charges will be made available to all uninsured patients who do not qualify for charity assistance. This discount is currently 30% off retail charges.

Automated Electronic Eligibility Searches - All patient accounts will be sent through a series of automated electronic eligibility transactions to retrieve all appropriate insurance information. The result is that patients are assured of receiving all eligible benefits, many times without ever receiving a bill.

Uncollectible Accounts - Once patient accounts are fully billed and remaining balances are determined to be uncollectible, the accounts are forwarded to private agencies for follow-up. Paramedics Plus utilizes agencies specializing in healthcare accounts that incorporate soft to medium collection practices.

2.4.8 Provide current and accurate cardiac arrest data, providing percentage of patients with return of spontaneous circulation and what parameters are used for "save rate" (i.e. Utstein Criteria)

Sustained ROSC (Return of Spontaneous Circulation) is a strong clinical indicator for improved outcome. For this calculation of ROSC, we measure all Sudden Cardiac Arrest (SCA) patients who meet the "Ütstein Template" criteria who also exhibit sustained ROSC at hospital arrival, regardless of ultimate outcome. We consider this measurement to be the "Out of Hospital-Ütstein". We believe this is directly related to early CPR and early EMS intervention.

Pinellas County Out of Hospital Utstein / ROSC

Year	2006	2007	2008	2009	2010
Percentage	42%	54%	42%	48%	57%

City of Rockford, IL - Request for Information EMS Service 311-F-023

Submitted by Paramedics Plus, L.L.C.

Description	Total	Tyler	OK West	OK-W Pct	OK East	OK-E Pct
Total Number of Cardiac Arrests	36		49		38	
Arrests with Presumed Cardiac Etiology	26	*72%*	31	*63%*	19	*50%*
Resc Not Halted in Field that Met Protocol	18	*50%*	5	*21%*	3	*21%*
# Cardiac Arrests - Non-Cardiac Etiology	10	*28%*	18	*37%*	18	*50%*
Total Field ROSC, Cardiac Event	7	*27%*	11	*35%*	7	*37%*
Total Field ROSC, All Etiologies						
Cardiac Arrest, Not Witnessed, Cardiac	22	*85%*	12	*39%*	10	*53%*
Card Arr, Not Witnessed, Card w/ROSC	6	*27%*	1	*8%*	1	*10%*
Cardiac Arrest, Witnessed, Cardiac	3	*12%*	15	*48%*	8	*42%*
Card Arrest, Witnessed, Card w/ROSC						
Total Bystander CPR, Cardiac Event	14	*54%*	16	*59%*	6	*33%*
EMS Witnessed Arrest, Cardiac	3	*12%*	4	*13%*	1	*5%*
With ROSC	1	*33%*	3	*75%*	0	0%
Initial Rhythm Asystole/PEA - Cardiac	19	*73%*	18	*67%*	15	*83%*
ROSC	5	*26%*	Unkn		Unkn	
Initial Rhythm VF/VT - Cardiac	7	*27%*	9	*33%*	3	*17%*
ROSC	2	*29%*	3	*33%*	1	*33%*
ETT Successfully Placed	24	*67%*	39	*87%*	34	*94%*
Alternative Airway (CombiTube)	8	*22%*	Unkn		Unkn	
IV/IO Access	34	*94%*	49	*100%*	37	*97%*
Response Time < 5 Minutes	9	*25%*	8	*30%*	7	*39%*
Card Arrest at Home (All Causes)	31	*86%*	29	*59%*	24	*63%*

2.4.9 Describe current procedures and equipment for handling bariatric patients.

The following is the protocol for transmitting bariatric patients from the Paramedics Plus – Pinellas County, Florida d.b.a., Sunstar EMS operation.

Operations Policy Manual

Operations 600-13

SUBJECT: Bariatric Responses and Transports

POLICY: 600-13

EFFECTIVE DATE: 11/23/2004

REVISED: 01/01/2009

Purpose

To provide guidelines for transferring and transporting patients who exceed the weight restriction of the ALS standard Stryker Stretcher (over 500 lbs) in a safe and dignified manner.

Definitions

Bariatric Unit: Ambulances designated for Bariatric transports are unit 47 and unit 53. These

units will be equipped with a Bariatric Stretcher, transition plate, 2 push/pull bars, a motorized

winch, tow strap, remote control, and 2 ramps. The Bariatric Unit will be dispatched to the scene of a transport by the EMS personnel on scene. The Bariatric Unit will be utilized only for patients with an estimated weight of between 500 – 1200 lbs. Patients less than 500 lbs can be transported safely on a regular Stryker stretcher (650 lb limit in lowest "down" position and 300 lbs in full "up" load position) using lift assistance.

In some situations, the bariatric unit may be required for patients who weigh less than 500 lbs but whose width can not be safely or comfortably accommodated on the regular stretcher. Supervisor will be contacted to assist in determining the need for the bariatric unit/stretcher.

The Soft Patient Mover:

This device can be used to move obese patients to the stretcher and then on to the hospital stretcher. The soft patient mover has 10 handles for 10 rescuers to assist in moving a large patient to the stretcher. This mover is located on every ambulance in the compartment behind the driver's side door.

Bariatric Stretcher:

This stretcher will accommodate an 850 lb patient in the full load position or a 1600 lb patient in the lowest position.

Push / Pull Bars:

The stretchers are equipped with push pull handles to be used when the stretcher is in the lowest position. These bars are placed in the front and back of the stretcher and are secured with pins into the holes to secure the handles. These handles should be used anytime a patient is moved in the lowest position.

Lift Handles:

The stretcher is also equipped with side lift handles which will allow six rescuers to lift the stretcher.

Winch:

The Bariatric unit is also equipped with a winch. A flip switch located under the driver's seat powers the winch. The winch, the winch strap, the remote control winch and power cord are located behind the captain's chair in the patient compartment. The winch can only accommodate 1100 lbs without manual assistance.

Winch Remote Control Cable:

The control cable is plugged into a box located on the driver side, on the back of the ambulance.

Ramps:

The Bariatric unit is equipped with 2 ramps located in the passenger side rear door

compartment. The ramps are 12 inches wide and 12 feet long. The ramps can only

accommodate up to 1200 lbs.

Transition Plate and Securing knobs:

To enable the ramps to be connected to the floor of the ambulance, the transition plate and securing knobs must be connected to the ambulance. The transition plate is located in the passenger side rear door compartment.

Patient Belt Extension:

Belt extensions are located on the back bars at the foot of the stretcher.

Procedure:

1. Park on a level ground to avoid tilting the ambulance or ramps to either side. Staging area requires a minimum of 40 feet length and 14 foot width to accommodate the ambulance, ramps, and one stretcher. Park the ambulance so that it does not tilt to either side. An ambulance tilting to either side will have an adverse affect causing uneven ramp alignment.

2. During patient movement to the Bariatric Stretcher remember to use the Soft Patient Mover whenever possible. This will allow for ease of movement both on scene and once in the hospital.

3. The stretcher is best kept in the lowest position using the Push / Pull Bars. The Push / Pull Bars will assist you in properly and safely moving your patient to the ambulance. Remember to use all straps located on the stretcher and if needed extension straps, which are located at the foot of the Bariatric Stretcher.

4. The winch will be attached to the stretcher behind the patient's head. The mechanical winch will pull the stretcher up into the ambulance.

READYING THE AMBULANCE TO ACCEPT YOUR PATIENT

1. Transition Plate serves as a transition point between the ramps and the ambulance floor. The plate lies flat on the floor near the rear entrance to the ambulance. There are three securing knobs used to attach the plate to the floor of the ambulance. The ramps are

hooked over the rods located to the outermost ends of the transitions plate.

2. The power supply switch for the winch is located next to the battery switch on the driver's seat.

3. The switch must be in the upward positions to supply power to the winch.

4. Attach the remote control for the winch to the power box on the back of the ambulance on the driver's side.

5. Remember to have the ambulance running when the winch is in use. This power switch should only be on when the winch is in use. If the winch switch is left on during transport, it will increase amperage draw on the batteries, which will cause the winch not to work at the hospital or fail to start the vehicle once the transport is completed.

6. The winch is mounted on the floor behind the captain's chair. Now attach the winch strap and hook to the stretcher behind the patient's head. Make sure prior to use that the winch cable is taut and the strap is over the roll guide bar on the transition plate.

7. Ideally, four people should be present when loading and unloading the patient. One person on each side of the stretcher will need to guide the stretcher into the ambulance and a third person will need to be in the unit to guide the stretcher into the antlers. A fourth person will be handling the remote control for the winch.

8. All personnel must stay clear of the winch strap.

2.4.10 Is standby service for training, police stand offs, and fire ground included in pricing with current contracts? If not, detail pricing policy for this service.

Typically, Paramedics Plus does not charge for these types of services

2.4.11 Identify what type of software is used for patient care reporting

Electronic Patient Care Reporting systems are an integral part of a quality patient care focused EMS system. The ability to perform timely quality improvement reviews and extract data on nearly every aspect of service delivery provides decision makers with the tools needed to improve the system.

Paramedics Plus utilizes the RescueNet ePCR suite from ZOLL.

The user-friendly design layout decreases the amount of time required to complete the ePCR. The HealthEMS Mobile application uses intuitive icons that clearly represent the action that will take place when selected. The ePCR layout is designed as one, continuous flow for easy access. The user has the ability to see all previous documentation with a simple vertical scroll. "Jump to" icons/fields allow for easy navigation/access to all sections of the ePCR.

2.5 About Communications

2.5.1 Identify software and hardware for dispatch alerting system, radio infrastructure and CAD or Computer Aided Dispatch.

Paramedics Plus is familiar with all the leading brands of CAD and radio systems. We currently work with the following CAD dispatch systems; Zoll RescueNet products, TriTech CAD and Intergraph CAD.

Our radio infrastructure is a Motorola Astro P25 Digital Wide Area Radio system with digital unit and station alerting. Most hardware is IBM servers and workstations.

2.5.2 Identify back up plan for radio communication outages and CAD failure.

Until we are able to evaluate the current system and equipment, it is not possible to accurately determine the best design for a backup system. All Paramedics Plus operations have redundant systems in the case of system failures or outages.

2.5.3 Identify mobile data terminals/computers software and hardware.

Paramedics Plus currently utilizes the following MDT/MDC devices;

- Hardware - DriverTech

  DriverTech provides immediate visibility into the fleet with GPS/AVL updates to the CAD. Real-time ambulance statusing over cellular data dramatically reduces radio traffic allowing for a more efficient Communications Center. Mapping helps the crew navigate to the scene faster and ultimately will save more lives.

- Truck PC's, Panasonic CF19

  The Toughbook 19 features a 10.4" sunlight-viewable 1,000 nit touchscreen with Panasonic CircuLumin™ technology, and an Intel® Core™ i5 vPro™ processor.* Integrated options include a backlit keyboard (emissive or rubber), GPS receiver, Gobi™2000 mobile broadband and a dual touch LCD (touchscreen and digitizer). In addition, a 6-foot drop & IP65 certified1 design with a full magnesium alloy case, helps to ensure that the Toughbook 19 will stand up to the most rigorous environments.

- Toughbooks and Software - Zoll Nomad/Navigator mobile client,

  RescueNet Navigator from ZOLL is a Mobile Data Computer (MDC) that provides the crew with incident information as soon as it is dispatched, allowing them to move quickly and cut out of the chute time. A visual map and accurate turn by turn directions are provided as vehicles navigate to the scene. The combination of these two features ensures that we are providing the fastest possible incident response.

- Marvlis Mobile Client, and Madusa and Zoll Electronic Patient Care Reports.

  MARVLIS Client is your in-vehicle connection to dispatch. Designed with the driver in mind, Client utilizes GPS and wireless communications to display real time maps and routes recommended by MARVLIS Server as well as providing

valuable information. Store multiple destinations such as headquarters, posts and hospitals for quick and simple routing. Field supervisors can access information about resources under their command, new incidents in the system and dispatch assignments.

2.5.4 Outline conflict resolution procedures with current clients.

Paramedics Plus strives to maintain positive and open communications with our customers. By having open direct lines of communication and having established expectations beforehand, we feel that instances of conflict or misunderstanding are greatly reduced.

Below is a copy of the wording from our Sunstar EMS contract.

SECTION 713. DISPUTE RESOLUTION

Contractor and the Authority will attempt to settle any claim or controversy arising from this Agreement through consultation and negotiation in good faith and a spirit of mutual cooperation. If those attempts fail, the dispute will be mediated by a mediator chosen jointly by Contractor and the Authority within thirty (30) days after notice by one of the parties demanding non-binding mediation. Neither party may unreasonably withhold consent to the selection of a mediator; Contractor and the Authority will share the cost of the mediation equally. The parties may postpone mediation until they have completed some specified, but limited, discovery about the dispute. The parties may also replace mediation with some other form of non-binding alternate dispute resolution ("ADR") procedure.

Any dispute that cannot be resolved between the parties through negotiation or mediation within two (2) months after the date of the initial demand for non-binding mediation may then be submitted by either party to the 6th Judicial Circuit Court, State of Florida, in Pinellas County. . Each party consents to jurisdiction over it by such a court. The use of any ADR procedures will not be considered under the doctrine of laches, waiver, or estoppel to affect adversely the rights of either party.

Either party may resort to the judicial proceedings described in this paragraph prior to the expiration of the two (2)-month ADR period if (a) good faith efforts to attempt resolution of the dispute under these procedures have been unsuccessful, or (b) interim relief from the court is necessary to prevent serious and irreparable injury to such party or any of its Affiliates, agents, employees, customers, suppliers, or sub-contractors.

2.5.5 Outline internal investigation procedures.

Paramedics Plus provides its employees with convenient and reliable methods for reporting incidents. Incidents are situations of a serious nature that may affect patient care, employee and/or scene safety or are actions of malice or ill intent. Incidents are immediately forwarded to a supervisor. Depending on the nature of the incident, Paramedics Plus uses escalating levels of investigation and involves various levels of management.

Once the incident is reported the supervisor immediately opens a case file utilizing the Ninth Brain Suite and begins a prompt investigation and interviews of the parties involved that may have knowledge of the facts or incidents that are alleged to have occurred.

Once the supervisor has completed the investigation they will consult with the General Manager of COO as well as the Human Resources Director if necessary to determine the best course of action to resolve the incident and prevent reoccurrence.

Paramedics Plus utilizes the "Just Culture" concepts to promote a culture in which employees are willing to come forward to report incidents in the interests of system safety. It is the balancing of the need to learn from our mistakes and the need to take disciplinary action that motivates adoption of a just culture.

A just culture recognizes that competent professionals make mistakes and acknowledges that even competent professionals will develop unhealthy norms (shortcuts, "routine rule violations"), but has zero tolerance for reckless behavior.

The response to an event (or near miss) is tied to the mechanism of error. An isolated human error is an opportunity to correct system weaknesses (e.g., confusing drug labels). At-risk behavior may also indicate a system vulnerability that should be fixed. However, the individual should be coached so that he understands the risks he has taken. Reckless behavior may be grounds for disciplinary action. The intent is to reduce the risk of future reckless conduct.

Repetitive problems are often caused by system weaknesses, but sometimes are individual performance issues, particularly when coaching or additional training has not improved the problem.

2.5.6 Describe communication approach between your firm and the client in the contractual relationship. What is the typical reporting method and detail provided to the owner? Provide examples.

As part of the Request for Proposal process or the subsequent contract negotiations, Paramedics Plus establishes with the Authority what reports they want to see and at what interval. The typical reports package includes:

- Monthly response time compliance report
- Investigation of any Priority 1 call exceptions
- Total calls and response for reporting period (usually monthly)
- Significant events or failures

In addition, Paramedics Plus attends regularly scheduled meetings of the agency tasked with oversight of the EMS system. Composition of this group ranges from a formal oversight Board or Commission to a collection of various department heads or in some cases is the Fire Chief or the person responsible for Public Safety.

To ensure accessibility of Paramedics Plus leadership to the elected officials, our manager(s) attend regularly scheduled City Council meeting and any other meeting when requested or deemed necessary by the City

Below is an example of our response time compliance report generated by our CAD system:

City of Rockford, IL - Request for Information EMS Service 311-F-023

Submitted by Paramedics Plus, L.L.C.

Response Time Compliance

Date IS BETWEEN 02/01/2011 AND 02/28/2011

ETMC EMS

Tyler

Contracted Compliance: 90%

	Life Threatening Emergencies 8:59				Non-Life Threatening Emergencies 12:59				Scheduled Routine Transfers 20:00				Unscheduled Routine Transfers 1:00:59			
			Cumulative				Cumulative				Cumulative				Cumulative	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
00:00 to 00:59	7	3%	7	3%	71	6%	71	6%	97	82%	97	81%	374	59%	374	58%
01:00 to 01:59	3	1%	10	4%	6	1%	77	6%	5	4%	102	85%	30	5%	404	63%
02:00 to 02:59	10	5%	20	9%	31	3%	108	9%	3	3%	105	88%	12	2%	416	65%
03:00 to 03:59	16	7%	36	16%	64	6%	172	15%	2	2%	107	89%	7	1%	423	66%
04:00 to 04:59	26	12%	62	28%	119	11%	291	26%	2	2%	109	91%	10	2%	433	68%
05:00 to 05:59	34	15%	96	43%	135	12%	426	38%	3	3%	112	94%	16	3%	449	70%
06:00 to 06:59	40	18%	136	61%	163	15%	589	52%	3	3%	115	96%	20	3%	469	73%
07:00 to 07:59	31	14%	167	75%	121	11%	710	63%	0	0%	115	96%	8	1%	477	75%
08:00 to 08:59	35	16%	202	91%	103	9%	813	73%	1	1%	116	97%	5	1%	482	75%
09:00 to 09:59	3	1%	205	93%	60	5%	873	78%	0	0%	116	97%	10	2%	492	77%
10:00 to 10:59	12	5%	217	98%	57	5%	930	83%	1	1%	117	98%	8	1%	500	78%
11:00 to 11:59	1	0%	218	99%	50	4%	980	88%	0	0%	117	98%	10	2%	510	80%
12:00 to 12:59	1	0%	219	99%	75	7%	1,055	94%	0	0%	117	98%	5	1%	515	80%
13:00 to 13:59	1	0%	220	100%	16	1%	1,071	96%	0	0%	117	98%	8	1%	523	82%
14:00 to 14:59	0	0%	220	100%	14	1%	1,085	97%	0	0%	117	98%	5	1%	528	83%
15:00 to 15:59	0	0%	220	100%	6	1%	1,091	98%	0	0%	117	98%	7	1%	535	84%
16:00 to 16:59	0	0%	220	100%	6	1%	1,097	98%	0	0%	117	98%	4	1%	539	84%
17:00 to 17:59	0	0%	220	100%	3	0%	1,100	98%	1	1%	118	99%	3	0%	542	85%
18:00 to 18:59	0	0%	220	100%	4	0%	1,104	99%	0	0%	118	99%	6	1%	548	86%
19:00 to 19:59	0	0%	220	100%	1	0%	1,105	99%	1	1%	119	100%	3	0%	551	86%
20:00 to 20:59	0	0%	220	100%	1	0%	1,106	99%	0	0%	119	100%	7	1%	558	87%
21:00 to 21:59	0	0%	220	100%	0	0%	1,106	99%	0	0%	119	100%	8	1%	566	88%
22:00 to 22:59	0	0%	220	100%	3	0%	1,109	99%	0	0%	119	100%	1	0%	567	89%
23:00 to 23:59	0	0%	220	100%	0	0%	1,109	99%	0	0%	119	100%	1	0%	568	89%
24:00 to 24:59	0	0%	220	100%	1	0%	1,110	99%	0	0%	119	100%	0	0%	568	89%
25:00 to 25:59	0	0%	220	100%	0	0%	1,110	99%	0	0%	119	100%	4	1%	572	89%
26:00 to 26:59	0	0%	220	100%	1	0%	1,111	99%	0	0%	119	100%	6	1%	578	90%
27:00 to 27:59	0	0%	220	100%	0	0%	1,111	99%	0	0%	119	100%	2	0%	580	91%
28:00 to 28:59	0	0%	220	100%	0	0%	1,111	99%	0	0%	119	100%	6	1%	586	92%
29:00 to 29:59	0	0%	220	100%	0	0%	1,111	99%	0	0%	119	100%	1	0%	587	92%
30:00 to 30:59	0	0%	220	100%	0	0%	1,111	99%	0	0%	119	100%	2	0%	589	92%
31:00 to 31:59	0	0%	220	100%	0	0%	1,111	99%	0	0%	119	100%	2	0%	591	92%
32:00 to 32:59	0	0%	220	100%	0	0%	1,111	99%	0	0%	119	100%	2	0%	593	93%