BOARD OF DIRECTORS
SPECIAL MEETING
January 13, 2015
6:30 pm

Health District Office Building
120 Bristlecone Drive, Fort Collins

MINUTES

BOARD MEMBERS PRESENT: Bernard J. Birnbaum, MD, President
Tess Heffernan, M.Ed., Vice President (by phone)
Michael D. Ligget, Esq., Secretary
Tracy L. Nelson, Ph.D., Treasurer (by phone)
Steven J. Thorson, MD, Liaison to PVHS Board

STAFF PRESENT: Bruce Cooper, M.D., Medical Director
Richard Cox, Communications Director
Dan Sapienza, Policy Coordinator
Chris Sheafor, Support Services Director
Karen Spink, Assistant Director
Nancy Stirling, Assistant to Executive Director
Lin Wilder, Community Impact Director

CALL TO ORDER: APPROVAL OF AGENDA
President Bernard Birnbaum called the meeting to order at 6:37 p.m.

MOTION: To approve the agenda as presented.
Motion/Seconded/Carried Unanimously

PUBLIC COMMENTS
None.

DISCUSSION
Emergency Medical Services RFP
The PFA offered the Health District the opportunity to have one of our staff members be
appointed as a member of the PFA’s EMS RFP Selection Committee, and the Health District
accepted the offer and asked for Dr. Bruce Cooper to be appointed. The purpose of this Special
Board meeting is for the Board to discuss any considerations and principles they would like to
give to our representative, Dr. Cooper.

The EMS RFP was designed by the procurement department at the City of Fort Collins in
collaboration with Poudre Fire Authority over the past year or so and is based on similar RFPs
from around the country. On Page 30 of the RFP it notes specific scores for each of the
deliverables along with instructions to the Selection Committee in general on how to score. The scores are due on January 23; they will then be totaled and there is the option that one or more firms may be asked to do an interview on February 13, which would be conducted by the Selection Committee. A final recommendation will then be made to the PFA Chief who will convey the recommendation to the PFA Board for final determination. Services are anticipated to begin in the 3rd Quarter of 2015. While the Selection Committee must follow the published RFP in its deliberations, and the RFP contains specific standards that are not negotiable, there is room for the Health District Board to provide guidance on our priorities and criteria to our representative, which he can use as guidelines during the scoring and interview processes.

The Board has affirmed that the provision of EMS services directly relates to the Health District’s mission because it has a direct bearing on the health of the people in our community. The Board wants to ensure that EMS services in this community are of high quality and that they meet or exceed the standards of the current EMS services.

**Board Discussion:** One board question was whether the Poudre Fire Authority has the legal authority to make the decision of who will provide EMS services in our community and why this RFP process is being initiated at this time. As gleaned from PFA board meeting minutes, an intergovernmental agreement was created and currently exists between PFA and the City of Fort Collins for fire protection services for the city and surrounding rural areas. The City's Attorney has stated that in their review of Colorado State Law pertaining to fire districts, PFA does have the authority to initiate an RFP process and select an EMS provider.

Up until the Health District separated from the operational duties of Poudre Valley Hospital in 1994, the District (as the owner and operator of Poudre Valley Hospital) operated the ambulance services. Since 1994 PVH ambulance services (now operated by PVH, not the Health District), has been the provider of community emergency medical services without a contract ever having been developed. This worked well until a year or two ago when PFA started hearing from other providers interested in ambulance services. Also being taken into consideration is the advent of another hospital soon to be in the community (Banner Health) and the need to avoid any conflict that could be caused by having multiple response systems. It is, therefore, the aim of PFA to have an exclusive contract with a single EMS provider.

The Board inquired as to how many of the requirements delineated in the RFP are new requirements. It was commented that many of the components listed in the RFP are already being provided. It appears, however, that new requirements pertain to issues of more transparency and accountability, for example, fee schedule transparency, specific response times, performance measures, standards in terms of training, vehicle equipment, medical supplies, etc.

The Board asked if the names of the members of the PFA Board are available. They are listed on the PFA website.

**Summary of Board values/guidance/principles:**

- That there be minimal disruption to services if/as transition from current provider to new provider; candidates should address their approach to managing any disruption in their deployment plan and/or in interview.
- High quality of care, services, staffing and medical capabilities.
• Ambulance service that will provide services and community benefits beyond the RFP, services beyond the traditional 911 response such as: training, education of other providers about emergency response, ACLS, PALS skills, community involvement around issues of frequent users of the system, etc.
• Ability to communicate well with ER to increase efficiency of care that relates to improvement in outcomes.
• Consider literature about elements of highest quality EMS services.
• Ensure that there are clear instructions on scoring so there is uniformity and fairness in the scoring process across the Selection Committee.

ADJOURN

MOTION: To adjourn the meeting.
Moved/Seconded/Carried Unanimously

The meeting was adjourned at 7:30 p.m.

Respectfully submitted:

Nancy L. Stirling, Assistant Secretary

Bernard J. Birnbaum, M.D., President

Tess Heffernan, M.Ed., Vice President

Michael D. Liggett, Esq., Secretary

Tracy L. Nelson, Ph.D., Treasurer

Steven J. Thorson, M.D., UCH Health-North (PVHS) Board Liaison