




PO Box 1466
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Date: January 10, 2011

To: Audit & Finance Committee

From: Jennifer Ruttman, City Auditor 

Subject: Southwest Ambulance Contract – Follow-up Review

cc: Harry Beck, Fire Chief
Mary Cameli, Assistant Fire Chief
Keith Pyers, Deputy Fire Chief

Pursuant to the Council-approved audit plan, the City Auditor's office has completed a follow-up review of our audit of the City's contract with Southwest Ambulance. The final report with appendix and the Fire Department's response are attached.

Please feel free to contact me at x3767 or Jason Taylor at x3635 if you have any questions or comments about this report.



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FOLLOW-UP REVIEW

CITY AUDITOR

Report Date: December 21, 2010
Department: Mesa Fire Department
Subject: Follow-up Review of the Southwest Ambulance Contract

OBJECTIVE

The objective of this review was to determine whether the Mesa Fire Department (MFD) has effectively implemented the contract monitoring changes noted in its response to our April 2009 audit of the Southwest Ambulance Contract.

SCOPE & METHODOLOGY

To accomplish our objectives, we:

- Questioned MFD staff members and others as necessary.
- Reviewed documentation in the contract master file.
- Reviewed cost reimbursement invoices.

BACKGROUND

On April 15, 2009, we issued a report on our audit of the Southwest Ambulance Contract. The objectives of that audit were to assess whether the contract terms are favorable to the City; assess the adequacy of the MFD's contract monitoring efforts; and assess whether Southwest Ambulance is in substantial compliance with the contract.

The audit report included several recommendations, which can be summarized as follows:

- Improve the data and processes used to measure Southwest Ambulance's emergency (Code 3) response times.
- Negotiate more favorable contract terms, such as increased insurance requirements; improved performance measures; and additional enforcement mechanisms, such as liquidated damages for instances of poor performance.
- Solicit available information for assessing Southwest Ambulance's performance, such as oversight information from the Arizona Department of Health Services. Also, better document performance-related discussions with Southwest.
- More accurately recover reimbursements from Southwest Ambulance for MFD paramedic ride-ins, including about \$28,000 in prior period under-reimbursements.

In their response to the report, the MFD agreed with all of our recommendations and presented corresponding corrective action plans.

CONCLUSION

The MFD has not implemented many of its 2009 corrective action plans, largely because management did not remain cognizant of them during a period of significant staff changes and IT project implementations. For example, when the MFD rotated its contract monitoring staff, responsibility for implementing the plans was not effectively reassigned.

The primary area that has received attention is the negotiation of more favorable contract terms. At the time of the audit, the MFD had just initiated procurement for a new regional ambulance contract and used that opportunity to add many of our recommended terms to the contract draft. However, this new regional contract also increases the importance of contract monitoring improvements. If the contract is executed, the MFD will have the primary monitoring responsibility on behalf of the participating municipalities. In addition, staff will be responsible for monitoring a higher volume of compliance and response time information; and vendor performance will for the first time be tied to liquidated damages. As of our review, the City and other contract parties were working toward approval of the contract terms by the Arizona Department of Health Services.

Our current recommendations are listed below. For a complete list of the corrective actions presented by the MFD in 2009, along with our corresponding findings regarding implementation status at the time of this review, please see the attached Appendix.

RECOMMENDATIONS

1. MFD management should implement the corrective action plans presented in their 5/12/2009 response to our audit. If a plan cannot or should not be implemented due to changing circumstances, systems, or processes, alternative corrective actions should be substituted to effectively address the original finding.
2. MFD management should provide written quarterly status reports to the City Manager or designee regarding their action plans. These reports should include specific data and/or other supporting documentation, and they should continue until all items have been fully implemented.


We plan to conduct another follow-up review in approximately 9 months to re-assess the status of the MFD's 2009 corrective action plans.

APPENDIX	
Corrective Action	Implementation Status
CAP#1: Inferior Contract Terms	
Cost recovery for administrative oversight of contract: <ul style="list-style-type: none"> Negotiate provision in contract that requires contractor to reimburse MFD for contract administration costs. 	In Progress The regional ambulance contract draft contains this term.
Make sure contractors insurance is equal to or exceeds the City's insurance: <ul style="list-style-type: none"> Work with City Risk Management to develop the insurance requirements. 	In Progress The regional ambulance contract draft contains this term.
Add performance measures: <ul style="list-style-type: none"> Contract Administrator to work with Management Performance and Accountability Office to develop appropriate measures. 	Not Fully Implemented The MFD did not work with MPA to develop performance measures. However, the regional ambulance contract draft allows for the development of performance measures related to customer service surveys.
Ensure contractor performance: <ul style="list-style-type: none"> Include liquidated damages for performance failures. 	In Progress The regional ambulance contract draft contains this term.
CAP#2: Response Time Measurement	
Collect accurate data for Code 3 response times: <ul style="list-style-type: none"> Develop a written, agreed upon validation procedure with the contractor. 	In Progress Written procedures were drafted but they have not yet been finalized and incorporated into the contract Master File.
<ul style="list-style-type: none"> Add a new event type with CAD upgrade. 	In Progress New event types were added, and the MFD is considering methods for querying the information.
<ul style="list-style-type: none"> Train dispatchers to properly document code 3 calls. 	Not Implemented
<ul style="list-style-type: none"> Work with ITD to automate (response time reconciliation) process. 	Not Implemented Some elements of the process could be easily automated using existing technology.

APPENDIX	
<u>Corrective Action</u>	<u>Implementation Status</u>
CAP#3: Contract Monitoring Improvements	
Document all performance issues, and request information from Transportation agency monthly. Keep all documentation of performance issues in Master File.	Not Fully Implemented The MFD has created a contract master file, but does not consistently document performance issues and meetings.
Request and review information from Department of Health quarterly: <ul style="list-style-type: none"> • Keep this information in Master File. • Meet with Ambulance Provider to discuss issues discovered by DHS. 	Not Implemented
Request information from Ambulance provider yearly: <ul style="list-style-type: none"> • Maintain current list of station locations, dedicated personnel, training and certification reports, and financial reports, in Master File. 	Not Implemented
Gather information on provider performance: <ul style="list-style-type: none"> • Survey customers semi-annually on provider performance. 	Not Implemented
Understand how to monitor contract more efficiently: <ul style="list-style-type: none"> • Attend the City's Contract Monitoring training. 	Not Implemented Although one of the original contract monitors attended, those who took over the monitoring function have not. Two classes have been offered since that transition.
CAP#4: Paramedic Ride-in Reimbursements	
Recover ride-in costs that were under-reimbursed since 2006, and stay current on rate adjustments for transport fees set by Department of Health Services:	
<ul style="list-style-type: none"> • Work with Southwest Ambulance to recover under-reimbursed ride-in fees. 	Implemented Southwest Ambulance remitted about \$28,300 in July 2009.
<ul style="list-style-type: none"> • Monitor DHS web site, quarterly, for cost of living adjustment that corresponds to transport fees. 	Not Implemented As a result, the MFD missed another 8.9 percent fee increase in June 2010. The MFD has agreed to re-bill that month and monitor the DHS Web site monthly.
<ul style="list-style-type: none"> • MFD and SWA to define, in writing, the cap on ride-in reimbursements. 	Not Implemented



To: Jennifer Ruttman, City Auditor
From: Mary Cameli, Assistant Chief
Thru: Harry Beck, Fire Chief
Date: 1/10/2011
Subject: Response to Southwest Ambulance Contract Audit



The information below is a response to the audit conducted by the City Auditor's Office on the Fire Department's Transportation Services contract with Southwest Ambulance. Specifically, this document will address the challenges and progress that we have experienced while addressing the items outlined in the Corrective Action Plan.

BACKGROUND

On April 15, 2009, the City Auditor's office generated a report that outlined a number of deficiencies related to our current Southwest Ambulance contract. The report clearly defined the deficiencies as follows:

- Inferior Contract Terms
- Response Time Measurement
- Contract Monitoring Improvements
- Paramedic Ride-in Reimbursement

After receiving the report, the Fire Department met with the Auditor's office and worked collaboratively to develop a Corrective Action Plan (CAP) that would address the deficiencies which had been identified. The official CAP was delivered to the Fire Department and the Emergency Medical Services (EMS) Division was given the responsibility to address the items that were outlined. EMS began implementation of this CAP in the summer of 2009. Approximately twelve months later the Auditor's Office performed a routine CAP review and met with the Fire Department EMS representatives to discuss the items that have yet to be completed.

Note: This document only contains the items within the report requiring follow up.

CHALLENGES

Fall of 2009 brought significant change to the EMS Division as we lost an Administrative Assistant and a Captain. Furthermore, we experienced a change in Deputy Chiefs as well as a change in the individual responsible for monitoring the contract. Additionally, we experienced a significant reduction in our operating budget. The cumulative effect of these changes required a complete reorganization of the administrative and functional responsibilities assigned to the EMS division. Unfortunately, the above mentioned circumstances had a less than favorable effect on our ability to manage many of the items identified in the original CAP.

MOVING FORWARD

On December 20, 2010, the Fire Department met with the Auditor's office to discuss the challenges that we have experienced. We also discussed our plan to overcome these challenges as well as the actions necessary to address the defined deficiencies. Below you will find a list of identified deficiencies and our plan to address them.

CAP #1: Inferior Contract Terms

There were four items identified within this category and to date, three of the items have been adequately addressed with language that has been added to our new contract. The fourth item will be addressed as follows:

Add Performance Measures

Contract Administrator will work with Management Performance and Accountability Office to develop performance measures that are appropriate and germane to the scope, content and language contained within the new Regional Ambulance Contract.

- Initial meeting with MPA and Contract Administration will take place in January 2011.
- Auditing Representative will be notified and informed as progress is made to address this issue.

CAP#2: Response Time Measurement

There were four items identified within this category.

Develop a written, agreed upon procedure with the contractor.

- EMS Division Chief to follow-up with SWA administration to finalize the procedure that was drafted collaboratively in August 2009.
 - This item will be added to January's Code 3 compliance meeting agenda.

- Our goal is to have a signed document added to the Master Contract file by February 2011.
- Auditing Representative will be notified and informed as progress is made to address this issue.

Add new event types within CAD.

- New event types were input into the CAD System in plain language during October as per the memo supplied by Chief Kotsur. See Pages 7-8

Train Dispatchers to properly document code 3 calls.

- Dispatchers were updated on the need to properly document benchmarks and ambulance response changes .
- Mesa PD's ITD staff is working to develop a CAD Query to identify all calls that initiated a "Code 3 Response for SWA" from the initial dispatch to arrival onscene. The Query will incorporate all event types that require an ambulance response "Code 3" from dispatch to arrival onscene. Additionally, the query will need to:
 - Search for incidents with an ambulance response upgraded to "Code 3" while enroute and calculate the time from upgrade to arrival onscene.
 - Search for all incidents with Southwest Ambulance dispatched into the City of Mesa regardless of whether Mesa Fire or an Automatic Aide Agency apparatus responded to the incident.

See document attached on page 9.

Work with ITD to automate (response time reconciliation) process.

- A Minor Project "Fire/EMS Code 3 Reconciliation - ID 3533" has been initiated to improve the reconciliation of response times between Mesa Fire EMS and Southwest Ambulance.
- Fire Technical Services will work with Fire EMS, SWA, and Mesa ITD staff to develop an excel format document that is automatically populated monthly to support the Code 3 response time reviews. The goal of the project is to improve the review meetings by automatically calculating response times and providing a comparison based on incident number.

CAP#3: Contract Monitoring Improvements

There were five items identified within this category:

Document performance issues monthly

- The EMS Division will establish a monthly meeting that addresses this and the balance of the issues identified within CAP #3. Our intent is to establish a Monthly Activity Report that will be forwarded to the Fire Chief and the Assistant Chief over EMS for review.
 - EMS Division Chief or designee will meet with SWA Administration in January 2011 to collaboratively design this report.
 - Auditing Representative will be invited to this meeting and informed as progress is made to address this issue.
 - Our goal is to begin utilizing this report as the agenda for February's monthly meeting.
 - There will be meeting minutes for each monthly meeting which will include those in attendance.
 - Also included on the meeting agenda will be any complaints and resolutions. The information regarding a complaint and/or resolution will be recorded in the minutes. The details of the incidents will not be written but can be accessed through the EMS Pre-Hospital complaint file.

Request and review information from DHS

- The EMS Division will establish a monthly meeting that addresses this and the balance of the issues identified within CAP #3. Our intent is to establish a Monthly Activity Report that will be forwarded to the Fire Chief and Assistant Chief over EMS for review.
 - EMS Deputy Chief or designee will meet with SWA Administration in January 2011 to collaboratively design this report.
 - Auditing Representative will be invited to this meeting and informed as progress is made to address this issue.
 - Our goal is to begin utilizing this report as the agenda for February's monthly meeting.

Request information from ambulance provider yearly

- The EMS Division will establish a monthly meeting that addresses this and the balance of the issues identified within CAP #3. Our intent is to establish a Monthly Activity Report that will be forwarded to the Fire Chief and the Assistant Chief over EMS for review.
 - EMS Deputy Chief or designee will meet with SWA Administration in January 2011 to collaboratively design this report.
 - Auditing Representative will be invited to this meeting and informed as progress is made to address this issue.
 - Our goal is to begin utilizing this report as the agenda for February's monthly meeting

Gather information on provider performance

- The EMS Division will establish a monthly meeting that addresses this and the balance of the issues identified within CAP #3. Our intent is to establish a Monthly Activity Report that will be forwarded to the Fire Chief and Assistant Chief over EMS for review.
 - EMS Deputy Chief or designee will meet with SWA Administration in January 2011 to collaboratively design this report.
 - Auditing Representative will be invited to this meeting and informed as progress is made to address this issue.
 - Our goal is to begin utilizing this report as the agenda for February's monthly meeting
 - EMS will work with SWA in developing a process to obtain customer feedback that will allow MFD to assess their performance.

Understand how to monitor contract more efficiently

- The EMS Division Chief as well as the contract administrator will attend the contract management class that is offered by the City of Mesa. This will assist to acquire the necessary skills to more efficiently monitor any contract.
 - The EMS Deputy Chief or designee will make contact with the aforementioned parties in January of 2011
 - Auditing Representative will be notified and informed as progress is made to address this issue.

CAP#4: Paramedic Ride-in Reimbursement

There were three items identified within this category. To date, one of the items has been implemented. The remaining two will be addressed as follows:

Monitor DHS website for adjustments that correspond to transport fees

- The EMS Division will establish a monthly meeting that addresses this and the balance of the issues identified within CAP #3 and CAP#4. Our intent is to establish a Monthly Activity Report which includes a line item that identifies date DHS website was reviewed, which will be done every month. This information will be forwarded to the Fire Department Fire Chief and Assistant Chief over EMS for review.
 - EMS Deputy Chief or designee will meet with SWA Administration in January 2011 to collaboratively design this report.
 - Auditing Representative will be invited to this meeting and informed as progress is made to address this issue.

- Our goal is to begin utilizing this report as the agenda for February's monthly meeting.

MFD and SWA to define, in writing, the cap on ride-in reimbursements

- The EMS Division will establish a monthly meeting that addresses this and the balance of the issues identified within CAP #3 and CAP#4. Our intent is to establish a Monthly Activity Report that will be forwarded to the Fire Department Fire Chief and Assistant Chief over EMS for review.
- EMS Deputy Chief or designee will meet with SWA Administration in January 2011 to collaboratively design this report.
- Auditing Representative will be invited to this meeting and informed as progress is made to address this issue.
- Our goal is to begin utilizing this report as the agenda for February's monthly meeting.
- EMS will include in the monthly report the percentage of the ride-ins for the month.

Follow up with City Manager's Office Quarterly

In addition to the action plans the Assistant Chief over EMS will provide written quarterly reports to the City Manager or designee regarding the status of the action plans. The reports will include specific data and supporting documentation when applicable. This will continue until all items have been fully implemented.

CONCLUSION

The EMS Division is committed to completing all action items listed within this audit response. Due to changes within the EMS Division and the reduction in work staff, there were action items that were not addressed. We also have the Regional Contract which identifies some of the items listed within the audit. We were reluctant to start a process on information within the old contract when they are acknowledged in the Regional contract. The Regional Contract is still with Arizona Department of Health Services and we are awaiting a response to accept the contract as written. We have outlined our method to deal with each issue and the means in which it will be monitored. Our goal moving forward within the next nine months will be to attend to the issues outlined and make any adjustments or corrections necessary to achieve compliance.

We appreciate the work completed by the City Auditors Office. We understand the importance of having the necessary tools or methods in place to identify when and if the provider is being accountable. The findings within this audit allow us to identify all areas within the contract and to solidify a course of action which will be implemented on a monthly basis to assure conformity. We appreciate the time and effort that was required for the audit and recognize that this information will be an asset for the Department to monitor contracts more closely for compliance.



Public Safety Communications Division

TRAINING BULLETIN 2010-018

DATE: 10/28/10

SUBJECT: Four New Fire Call Types – Automatic Code 3 Calls

The Fire Department has requested four new call types to be used in place of “MED” on certain Automatic Code 3 calls. This change will be effective Monday, Nov.15, 2010. Employees can, however, start using these call types as soon as they have reviewed and understand this document.

The new call types are:

LABOR

DROWN

STROKE

CODE

LABOR

Any time a RP indicates that a female is in labor, or may be in labor, the call shall be entered as LABOR. LABOR can be entered as a combined 909LABOR if the patient has given birth.

DROWN

Any liquid submersion event which results in the need for medical response shall be entered as DROWN. This code is to be used regardless of whether or not the patient is breathing or conscious. The combined code 909DROWN has been programmed into CAD.

STROKE

Any incident where the reporting party indicates that a patient has had a stroke, or they believe the patient may have had a stroke, will be entered as STROKE. If the calltaker receives information that may cause them to believe this is a stroke related call, they will enter the call as STROKE. Guidelines provided by MFD on identifying a stroke include:

Droop (facial, eye)

Body is Limp (on one side)

Can't walk (new onset)

Drooling

Paralyzed (new onset, non-traumatic)

Unable to speak

Unable to sit up

Inappropriate words

Incontinent (urine and or feces)

Sleepy

Not alert

Unable to comprehend (speech or gestures)

CODE

The calltype CODE shall be used for any incident, other than drowning, where the patient is not breathing as a result of a natural event. Calls such as shooting, stabbing, MVA, suicide where the patient is not breathing shall be entered as a MED unless otherwise directed by the IQAs (2N1M for an MVA, etc.). A combined calltype of 909CODE has been entered into CAD.

CONCLUSION

These new calltypes will not appear in IQAs as they should be entered and used before the IQAs are ever accessed.

If an employee receives information that will update the calltype to one of the four listed, they can update the call from a MED to the appropriate calltype.

Memo

To: All Fire Dispatchers
Cc: AHQ Shift Captains
From: Alarm Room Deputy Chief
Date: October 25, 2010
Subject: Benchmarks

Dispatchers, this memo is a modified rewrite of a prior document from PSC staff dated 5/10/06. Please reference this document or see me if you have questions.

The use of Benchmarks is critical and required for information on cases when it is provided by field personnel. These Benchmarks are crucial to obtain accurate records and statistics. These statistics are used for many purposes such as accreditation, response times and ambulance contract assessment.

Examples:

*Fire Calls: Benchmarks such as Under Control, PAR and Loss Stopped are used to evaluate how quickly units were able to control the situation.

*Medical Calls: When an ambulance is upgraded or downgraded from their normal response, Benchmarks of Code 3 or Code 2 are queried to determine if the ambulances met their required response times. The Benchmarks of Standby and PAT W/Air Med are used to evaluate times relating to Helicopter responses and transfer of patient care.

Note: Mesa, Gilbert and Queen Creek ambulances follow the same response guidelines. Apache Junction Fire District ambulances respond code 3 on all Med assignments.

All of our Benchmarks are important. However, I want to emphasize the importance of Benchmarking ambulance response changes. With the addition of the new nature codes (Labor, Drown, Stroke, and Code) we will be able to track more ambulance code 3 responses. However, the data is limited to these codes only. Your ability to Benchmark is critical for complete accuracy. Thank you.

Please initial below next to your employee number

9287	12457	16243	18255
11009	15004	16347	
11014	15070	16657	Capt Button
11029	15511	16830	Capt Alexander
11494	15684	16833	Capt Ross
11978	15780	17185	Capt Beal
12197	15878	17533	Chief Kotsur BK