

**REQUEST FOR OFF-LINE MEDICAL DIRECTOR PROPOSAL**

PROPOSALS ACCEPTED NO LATER THAN:  
5:00 PM, MONDAY, FEBRUARY 29, 2015

TO: KRISS GARCIA  
AMERICAN FORK FIRE  
96 N. CENTER STREET  
AMERICAN FORK CITY  
UTAH 84003  
(801) 763-3045

AMERICAN FORK FIRE & RESCUE IS ACCEPTING PROPOSALS FROM QUALIFIED EMERGENCY ROOM PHYSICIANS TO PROVIDE OFF-LINE MEDICAL CONTROL RESPONSIBILITIES AS SPECIFIED IN THE TERMS OF THE CONTRACT.

\*\*\*PLEASE SEE ATTACHED INFORMATION/REQUIREMENTS\*\*\*

PLEASE DIRECT ALL QUESTIONS TO:

KRISS GARCIA  
AMERICAN FORK FIRE  
96 N. CENTER STREET  
AMERICAN FORK CITY  
UTAH 84003  
(801) 763-3045

SEALED PROPOSALS SHOULD BE MAILED OR HAND DELIVERED TO:  
KRISS GARCIA AMERICAN FORK FIRE, 96 N. CENTER STREET  
AMERICAN FORK CITY, UTAH 84003 (801) 763-3045  
PROPOSAL SHOULD BE CLEARLY MARKED “**MEDICAL CONTROL PROPOSAL**”.  
ALL PROPOSALS ARE DUE ON MONDAY, FEBRUARY 29, 2015 AT 5:00PM.

**AFFR RESERVES THE RIGHT TO REJECT ANY OR ALL PROPOSALS.**

**PROPOSALS**

American Fork Fire & Rescue (hereinafter referred to as “AFFR”) is soliciting proposals from qualified Physicians to serve as Off-Line Medical Director.

The duties under the proposed contract will include, but not necessarily be limited to, the following:

The Physician shall serve as the training consultant for the AFFR’s Emergency Medical Services (EMS). Specifically the Physician will be responsible for the AFFR’s EMS continuing education and quality assurance programs in accordance with State. The Physician shall also oversee in-service training requirements and as necessary train in competency skill levels including, but not limited to, the following subject areas:

- (1) Triage
- (2) Cardio-pulmonary resuscitation
- (3) Airway management, including;
  - a. Endotracheal or esophageal intubation
  - b. Removal of foreign objects
  - c. Suctioning
- (4) Administration of intravenous solutions and intravenous medications
- (5) Drug Administration
- (6) Arrhythmia recognition
- (7) Splinting and bandaging
- (8) Soft tissue injuries
- (9) Extrication and movement of injured persons
- (10) Bleeding wounds and shock
- (11) Oxygen administration
- (12) Emergency childbirth
- (13) Medical and environmental emergencies
- (14) Critical Care Transport; including vents
- (15) BLS/ALS provider certifications for EMS personnel
  - a. The Physician shall oversee formal continuing education (such classes to be scheduled on a bi-monthly basis) and provide other services hereunder—for an average of no less than two (2) hours each month and a total commitment to AFFR of not less than twenty-four (24) hours per year.
  - b. The Physician shall sit on the Utah County Emergency Service Subcommittee and attend county EMS meetings as scheduled
  - c. Shall review 75 EMS calls per calendar year including 50% of all Trauma and STEMI Designated Calls
  - d. The Physician shall oversee formal continuing education (such classes to be scheduled on a quarterly basis) and provide other services hereunder –for an average of no less than two (2) hours each month and a total commitment to AFFR of not less than twenty-four (24) hours per year.
  - e. The physician shall approve curriculum, oversee delivery of training and certification for Critical Care Paramedics.

#### MINIMUM QUALIFICATIONS

- a. The Physician shall:
  - (1) Possess and maintain in full force and effect all licenses and permits required to practice medicine in the State of Utah and to perform the services required by this Agreement;

- (2) Be familiar or become familiar with the design and operation of the local pre-hospital EMS system;
- (3) Be familiar or become familiar with the local dispatch and communications systems and procedures;
- (4) Have experience and/or training in pre-hospital emergency care of the acutely ill and/or injured;
- (5) Possess and maintain a working knowledge of EMS laws and regulations. EMS dispatch and communications, and local mass casualty and disaster plans;
- (6) Graduated or will graduate from a national or state EMS Medical Director's Course.

- b.** The Physician shall serve as the Off-line Medical Director for the AFFR EMS, and shall act as a consultant to AFFR in the areas of:
  - (1) EMS equipment selection;
  - (2) Program direction;
  - (3) EMS Competency evaluation; and
  - (4) Operational policy and procedure
  
- c.** The Physician shall supervise the medical care provided by the AFFR field EMS personnel, as required by Rule 426-15-401 of the Utah Administrative Code.
  
- d.** That in order to accomplish the objectives identified in Section 2d hereof, the Physician shall consult with the EMS Director and shall provide (at least) quarterly on-site observation of EMS procedures in patient treatment; and shall utilize the insight(s) derived therefrom to improve AFFR EMS training program and individual EMS performance.
  
- e.** That, in accordance with Rule 427-15-401 of the Utah Administrative Code, the Physician shall:
  - (1) Develop and implement patient care standards which include written standing orders and triage, treatment, and transport protocols;
  - (2) Ensure the qualification of field EMS personnel involved in patient care and dispatch through the provisions of ongoing continuing medical education programs and appropriate review and evaluation;
  - (3) Develop and implement an effective quality improvement training program, including medical audit, review and critique of patient care.

- f. That the Physician shall serve as the liaison between AFFR EMS and the administration and medical staff of the American Fork Hospital.
- g. Preference will be given to Physicians who practice out of American Fork Hospital.

#### COMPENSATION & LENGTH OF AGREEMENT

For services provided between April 1, 2016 and March 31, 2017, compensation of One Hundred Dollars (\$100.00) per hour, with a maximum (or a cap) of not more than Ten Thousand Dollars (\$10,000.00) for all services provided.

Submission to AFFR of a request for payment and summary of services provided – not later than March 1.

The agreement is renewable each year after a review of performance with the successful Proposer without new RFP's being posted.

The agreement shall go year to year unless either party would like to opt out following the first year.

AFFR and the successful Proposer must provide the other party 60 days notice of their intent to terminate the agreement following the first year.

Worker's Compensation Insurance coverage sufficient to cover the Physician for their time that he is providing services hereunder AFFR.

#### CONTENTS AND SUBMISSION OR PROPOSALS

If you are qualified and would like to be considered, please furnish a proposal. The contents of the proposal shall be complete in description, concise in volume, austere in form.

A. **Format.** The proposal shall be in the written format. The proposal shall be prepared on 8 1/2" X 11" paper and presented in three ring binders or spiral/comb bound. The administrative attachments, including completed forms and supporting documentation, shall be bound and submitted concurrently. Once submitted, the proposal cannot be altered without prior written consent of AFFR.

B. **Evaluation of Proposals.** All submitted proposals shall be opened TUESDAY MARCH 1, 2016 AT 3:00 PM. Proposals shall be evaluated based upon the qualifications and references of the Proposers, demonstrated competence of the Proposers, cost and the ability and commitment to complete the work. Awarded contracts WILL NOT be based solely upon the lowest cost, but shall be awarded on a determination of the proposal, which is most advantageous to AFFR.

If necessary a point system will be utilized to evaluate multiple proposals. Qualifications and references shall be 40 points, demonstrated competence shall be 30 points, and the ability to complete the work as described shall be 30 points for a total of 100 points.

**C. Addenda and Supplements to this Request for Proposal.** If it becomes necessary to revise any part of this request for proposal, an addendum will be provided to all who requested or received copies of this request. AFFR will not be responsible for any oral or other unofficial interpretation of any element of this RFP or its related documentation.

**D. Withdrawal of Proposals.** Unauthorized conditions, limitations or provision attached to a Proposal may render it as not complying with AFFR original request and may be subsequently rejected. No oral telephoned or faxed proposal or modifications to submitted proposals will be accepted. The proposal may be withdrawn upon request by the Proposers without prejudice, prior to, but not after the time fixed to receive proposals.

**E. Rejection of Proposal.** AFFR reserves the right to reject any or all proposals, to waive any informality in such proposals, to request new proposals, to revise the RFP prior to the time for final submission of written proposals, to proceed to do the work otherwise, to withdraw this RFP, to not award the contract, and to not award a portion or portions of the contract, or to negotiate separately with any source whatsoever in any manner necessary to serve the best interest of AFFR. AFFR may not award a contract based solely on this request for proposals and will not pay for the information obtained and solicited. The information obtained will be used in determining the proposal that best meets AFFR needs.

**F. Submittal Ownership.** All material submitted in response to this proposal becomes the property of AFFR and will not be returned unless the Proposers requests a withdrawal in accordance with paragraph D of this document. Submitted proposals may be reviewed and evaluated by any person at the discretion of AFFR.

**G. Cost.** Cost for developing proposals is entirely the responsibility of the Proposer and shall not be chargeable to AFFR.

**H. Acceptance of Proposal.** Submission of a proposal constitutes an agreement by the Proposers to each and all of the terms and conditions as set forth in this request. The contents of the proposal of the successful Physician shall become contractual obligations upon entering into a written contract with AFFR. Failure of the successful firm to accept these obligations may result in cancellation of the award.

**I. Contents.** The proposal shall be in the format of a written report. The proposal must respond to the RFP and be prepared as specified as to form, content and sequence.

- (1) Transmittal Letter and Title Page. A transmittal letter shall be included containing a brief statement of the Proposer's understanding of the work to be done and an indication of positive interest in performing the Off-Line Medical Control Director for American Fork Fire & Rescue. The letter

and/or a title page should contain the name of the Proposer, a street address for correspondence, and a primary contact for the proposal.

- (2) Qualifications and Experience. The proposal must supply information concerning the qualifications and experience of the proposing Physician
- (3) References. Proposer shall provide appropriate references.

## EVALUATION AND SELECTION PROCESS

All proposals that adequately contain the information requested in this RFP will be evaluated on the basis of the following criteria:

- Qualifications of the Physician.
- Location of Practice.
- Relevant professional experience.
- Ability to provide services required.

AFFR reserves the right to judge, evaluate, and reject any or all proposals. AFFR reserves the right to select any number of Proposers to be invited to give an oral presentation to an interview panel on their approach to the scope of work, qualifications, staffing, experience and capabilities. The Proposers to be interviewed, if any, will be notified in writing prior to the scheduled interviews. A limited number of Proposers may or may not be subsequently re-interviewed for final evaluation.