

Valley Regional Fire Authority and South King Fire & Rescue  
South King CARES Program  
Interlocal Agreement  
January 2020

This agreement is made and entered into by the Valley Regional Fire Authority (VRFA) and South King Fire & Rescue (SKFR).

RECITALS

1. This agreement is entered into in conformity with chapter 39.34 RCW, the Interlocal Cooperation Act.
2. The South King Community Assistance, Referrals, and Education Services (CARES) program is co-sponsored by King County EMS (KCEMS), provides non-emergency response to low-acuity 911 calls and patient referral services.
3. This Interlocal Agreement describes the relationship between VRFA and SKFR for a one-year period.
4. The VRFA and SKFR will jointly staff and operate a CARES Unit 10 hours per day, five days per week, Monday through Friday, excluding holidays, in the manner prescribed below. The CARES unit will provide service within the boundaries of both jurisdictions and any jointly contracted areas.

AGREEMENT

NOW, THEREFORE, in consideration of the mutual promises and benefits contained herein, it is agreed between the Agencies as follows:

1.0 Purpose and Scope of Agreement

- 1.1 The purpose and scope of this Agreement is to establish the terms of VRFA and SKFR's joint participation in the operation of a CARES unit. Participation in KCEMS's sponsored CARES program will allow both agencies and KCEMS to offer a regional, dual-agency partnership to provide non-emergency response to low-acuity 911 calls.

2.0 Term of Agreement

- 2.1 This Agreement shall be effective immediately upon execution—ratification and signature by both Parties—and shall continue in full force and effect for a term of twelve (12) months from execution, unless terminated by either party, upon ninety (90) days' written notice. Unless terminated by either party, this Agreement shall be automatically renewed annually for successive one-year terms.

3.0 Response Boundaries

- 3.1 The VRFA and SKFR agree that participation in CARES program will require cross-jurisdictional responses and services within the entirety of the VRFA's and SKFR's response boundaries.
- 3.2 Both agencies recognize that CARES responses and work may be completed by the other agency's personnel within their respective response boundaries.

4.0 CARES Administrative Board

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- 4.1 The VRFA and SKFR will form a "CARES Administration Board," hereafter referred to as the "Board," comprised of senior leaders from both organizations. The Board will:

4.1.1 Hold quarterly meetings

4.1.2 Ensure that both organizations are equitably sharing all costs related to the CARES program

4.1.3 Monitor all activities of the CARES program, including but not limited to:

4.1.3.1 Fiscal arrangements

4.1.3.2 Staffing

4.1.3.3 Data collection

4.1.3.4 On-scene performance

4.1.4 The Board will prepare joint reports as needed for each agency and for grant requirements.

5.0 Fiscal Arrangements

- 5.1 The VRFA and SKFR agree to a cost-sharing model as described in Exhibits B and C. Both agencies will ensure that all costs related to the CARES program are shared equally. These costs include, but are not limited to, personnel, program administration and management; vehicle and equipment maintenance; supplies and equipment. All program expenses are shared by a dedication of personnel and resources as detailed in this ILA without a cash exchange except for the cost of Social Worker compensation, outside training, including necessary associated travel expenses for the Social Workers, as budgeted and agreed, and vehicle repairs as detailed.

- 5.2 The VRFA and SKFR agree that Social Workers will be employees of SKFR, and that SKFR will submit an invoice to VRFA on a quarterly basis for one half of the total cost of compensation, including overtime and outside training including necessary associated travel expenses for all Social Workers in the program.

- 5.3 Each agency will be responsible for contracting with KCEMS for the purpose of acquiring funds related to their participation in the CARES program. The VRFA and SKFR will equally share funding they receive from KCEMS for the CARES team. As SKFR receives a higher MIH payment from KCEMS, SKFR will reduce the quarterly invoice to VRFA for Social Workers by an amount equal to one-half of the difference between funding received by SKFR and VRFA for CARES.

- 5.3.1 Example: SKFR is projected to receive \$357,000 and VRFA is projected to receive \$202,000 for the 2020 year.  $\$357,000 - \$202,000 = \$155,000$ .  $\$155,000 / 2 = \$77,500$ . SKFR applies a quarterly credit in the amount of \$19,375 ( $\$77,500 / 4$ ) to VRFA quarterly invoice for Social Worker costs.

- 5.4 The VRFA and SKFR will each invoice one-half of total contracted amount from other agencies who contract with this CARES unit for services outside of the VRFA and SKFR boundaries.

- 5.5 Each agency will be individually responsible for seeking external funding for the purpose of covering costs for the program.

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6.0 Hours of Operation

- 6.1 VRFA and SKFR will endeavor to operate the CARES unit 10 hours per day, five days per week, Monday through Friday excluding holidays.
- 6.2 VRFA and SKFR will make every effort to facilitate consistent scheduling and operation of the CARES unit. However, both parties recognize that consistent hours of operation may not be possible due to unforeseen events, including illness, local agency emergencies and/or other events.
  - 6.2.1 The VRFA and SKFR may adjust service hours and/or service days based on an evaluation of the unit, but should not decrease the availability below the equivalent of 50 operating hours per week. See Exhibit A.

7.0 CARES Staffing

7.1 Firefighter Staffing

- 7.1.1 VRFA and SKFR will attempt to co-staff the unit each day (one VRFA FF/EMT and/or one SKFR FF/EMT) and/or a social worker from the CARES team. Overtime is authorized to maintain the minimum staffing of one firefighter / EMT and one Social worker.
- 7.1.2 On-duty personnel will not be moved from staffed VRFA or SKFR response units in order to maintain CARES staffing.
- 7.1.3 A best effort shall be made by each agency to staff the CARES unit 5 days a week 10 hours a day with an assigned firefighter or a qualified firefighter on overtime.
- 7.1.4 Firefighter overtime staffing shall be the responsibility of the agency with the absent firefighter.
- 7.1.5 Staffing of the CARES unit shall not be a mandatory overtime position.
- 7.1.6 In the event that either agency is unable to provide a FF/EMT for a full or partial shift, and there is no CARES Social Worker available to staff the CARES Unit, the CARES unit may be staffed, as necessary, by two FF/EMTs from the same agency.

7.2 Social Worker Staffing

- 7.2.1 If only one CARES firefighter is scheduled to work, i.e. Monday or Friday, and all the social workers are on leave, the position shall be offered on overtime to the social worker that is not on leave. This expense will be shared equally between both agencies.
- 7.2.2 In the event that a social worker is not available, a firefighter will fill the vacant social worker position and the VRFA and SKFR will share this responsibility and expense equally. The VRFA EMS Captain will track the OT to ensure it is equally distributed between both agencies
- 7.2.2 The Board will routinely monitor expenses and staffing to ensure that expenses are distributed equitably between each agency.

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- 7.3 VRFA and/or SKFR personnel assigned to the CARES unit will be subject to work rules outlined in their home agency's collective bargaining agreements and policies. All personnel assigned to the CARES unit shall be and remain at all times employees of the agency that employed them prior to this agreement.

8.0 Day to day CARES Management

- 8.1 VRFA's EMS Officer (or designee) will:

- 8.1.1 Be the primary point of contact with SKFR.
- 8.1.2 Be designated as the Program Coordinator.
- 8.1.3 Be familiar with the guidelines of both agencies dealing with patient confidentiality, HIPAA, etc.
- 8.1.4 Coordinate CARES unit staffing for VRFA.
- 8.1.5 Coordinate an effective process of collecting and disseminating data and response reports of both agencies to KCEMS.
- 8.1.6 Work collaboratively with SKFR personnel.
- 8.1.7 Represent the CARES team, in cooperation with the SKFR CARES Captain, at local, regional, and interlocal MIH related meetings.

- 8.2 SKFR's CARES Captain will:

- 8.2.1 Coordinate CARES unit staffing for SKFR through the On Duty SKFR Battalion Chief.
- 8.2.2 Be the primary point of contact with VRFA.
- 8.2.3 Work collaboratively with VRFA personnel.
- 8.2.3 Be designated as CARES Captain.
- 8.2.4 Manage day to day operation of the CARES Team.
- 8.2.5 Represent the CARES team, in cooperation with the VRFA EMS Officer, at local, regional and interlocal MIH related meetings.

9.0 Vehicles and Equipment

- 9.1 The VRFA will provide a light-duty vehicle designated as the primary CARES unit.
  - 9.1.1 In the event the primary CARES vehicle is not available, VRFA and SKFR will work cooperatively to find a reserve vehicle to be used as the CARES unit.
- 9.2 Maintenance costs for the vehicle will be shared by VRFA and SKFR.

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9.2.1 Routine maintenance, such as fluid and oil changes, will be completed and paid for by SKFR.

9.2.2 Cost of repairs of non-routine maintenance items will be shared equally by VRFA and SKFR

9.3 Fuel costs will be shared between the VRFA and SKFR.

9.3.1 Fuel costs will be tracked by the VRFA and SKFR to ensure costs are equitably shared.

10.0 Data Collection

11.1 The CARES personnel will complete an electronic ESO record for each patient.

11.2 VRFA and SKFR will record CARES incidents in each agency's Records Management System (RMS) in a manner similar to mutual aid incidents.

11.2.1 VRFA and SKFR will work cooperatively to develop and maintain a stand-alone RMS for CARES incidents.

11.0 Reports

11.1 The Program Coordinator will submit a report in accordance with the frequency and format requested by KCEMS. The content of this report will contain raw data elements described by *KCEMS – Evaluation Measures* for the CARES program. See Exhibit D for more information.

12.0 Insurance

12.1 Each agency shall provide and maintain-suitable commercial general liability and auto liability insurance policies to protect it from casualty losses by reason of the activities contemplated by this Agreement. The limits of liability for each type of coverage shall be at least \$1,000,000 combined single limit.

13.0 Dispute Resolution

13.1 Prior to any other action, each agency shall meet and attempt to negotiate a resolution to any dispute that arises under this agreement.

13.2 If the parties are unable to resolve the dispute through negotiation, any party may demand mediation through a process to be mutually agreed to in good faith between the parties within 30 days. The parties shall share equally the costs of mediation and shall be responsible for their own costs in preparation and participation in the mediation, including expert witness fees and attorney's fees.

13.3 If a mediation process cannot be agreed upon or if the mediation fails to resolve the dispute then, within 30 calendar days, any party may submit the matter to binding arbitration according to the procedures of the Superior Court Rules for Mandatory Arbitration, including the Local Mandatory Arbitration Rules of the King County Superior Court, King County, Washington, as amended, unless the parties agree in writing to an alternative dispute resolution process. The arbitration shall be before a disinterested arbitrator with both parties sharing equally in the cost of the arbitrator. The location of the arbitration shall be mutually agreed or established by the assigned Arbitrator, and the laws of Washington will govern its proceedings. Each party shall be responsible

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for its own costs in preparing for and participating in the arbitration, including expert witness fees and attorney's fees.

- 13.4 Unless otherwise agreed in writing, this dispute resolution process shall be the sole, exclusive and final remedy to or for any party for any dispute regarding this Agreement, and its interpretation, application or breach, regardless of whether the dispute is based in contract, tort, any violation of federal law, state statute or local ordinance or for any breach of administrative rule or regulation and regardless of the amount or type of relief demanded.

14.0 Miscellaneous


- 14.1 Notices. All communications regarding this Agreement shall be sent to the parties at the addresses listed on the signature page of the Agreement, unless notified to the contrary. Any written notice hereunder shall become effective upon personal service or three (3) business days after the date of mailing by registered or certified mail, and shall be deemed sufficiently given if sent to the addressee at the address stated in this Agreement or such other address as may be hereafter specified in writing.
- 14.2 Benefits. This agreement is entered into for the benefit of the parties to this agreement only and shall confer no benefits, direct or implied, on any third persons.
- 14.3 Severability. If any provision of this Agreement, or its application, is held invalid, the remainder of this Agreement shall not be affected and the invalid provision shall be deemed severable from this Agreement.
- 14.4 Merger Clause. This Agreement constitutes the entire agreement of the Agencies and may not be modified or contradicted except by a writing signed by both Agencies. There are no other agreements, express or implied.
- 14.5 Non-Waiver. The failure of either party to insist upon strict performance of any provision of this Agreement shall not impact that party's right to insist upon strict performance at a later time.
- 14.6 Governing Law and Indemnification. Neither party shall be deemed to be an agent of the other, for purposes of this Agreement. Each party shall assume liability for the negligence, error and omissions of its own employees, volunteers, agents and officers. This Agreement shall be governed by the laws of the State of Washington.

14.7 Attorney Review. The Agencies agree that this Agreement should be reviewed by their attorney. If two or more agencies signatory hereto are represented by the law firm of Quinn and Quinn, P.S, and the Agencies consent to the dual representation by said firm, if a firm signature is affixed hereto under "approved as to form."

- 14.8 Filing. This Agreement shall be filed with the King County Auditor or listed by subject on the District's website. Entering into this Agreement shall not preclude either party from entering into separate interlocal agreements.

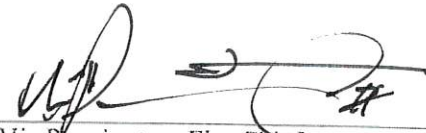
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IN WITNESS WHEREFORE, the Agencies by the signatures of their authorized representatives have executed this agreement effective upon the date of signatures.

  
Brent D. Swearingen, Fire Chief

01/21/2020  
Date

Valley Regional Fire Authority  
1101 D Street NE  
Auburn, Washington 98002

  
Vic Pennington, Fire Chief

02-03-2020  
Date

South King Fire and Rescue  
31617 - 1<sup>st</sup> Avenue South  
Federal Way, Washington 98003

APPROVED AS TO FORM:



QUINN AND QUINN, P.S., Attorney for the District and the VRFA



## Exhibit A

Public Health—Seattle & King County  
King County Emergency Medical Services (KCEMS) Division

**EXHIBIT A – SCOPE OF WORK AND REPORTING**  
Valley Regional Fire Authority

1. Identification Information:

- |                                   |   |
|-----------------------------------|---|
| A. Fire Department:               | Valley Regional Fire Authority  |
| B. Fire Department Administrator: | Fire Chief Brent D. Swearingen  |
| C. Agency Contract Monitor        | Name: Deputy Chief Dave Larberg<br>Phone: 253-288-5804<br>Fax: NA<br>E-mail: <a href="mailto:dave.larberg@vrfa.org">dave.larberg@vrfa.org</a><br>Remit Address: ATTN: DC Dave Larberg<br>Valley Regional Fire Authority<br>1101 D Street NE<br>Auburn, WA 98002 |
| D. King County EMS Contact        | Name: Erik Friedrichsen<br>Phone: 206-263-1457<br>Fax: 206-296-4866<br>E-mail: <a href="mailto:Erik.Friedrichsen@kingcounty.gov">Erik.Friedrichsen@kingcounty.gov</a>   |

2. Purpose:

This contract is intended to reimburse Agency up to the specific contract amounts (see Exhibit B-Budget), for participation in the Mobile Integrated Health (CARES) program. This contract covers activities described below between the dates of 1/1/2020- 12/31/2020. Reimbursement requested via this contract should not also be requested for reimbursement under the current Basic Life Support contract with King County Emergency Medical Services (KCEMS).

3. Eligible Costs:

Costs eligible for reimbursement, through this contract include:

- A. Staffing of the CARES unit.

4. The Agency shall:

A. General:

- i. Comply with all requirements as specified in current Basic Life Support (BLS) contracts with KCEMS.

B. CARES Unit Staffing:

- i. Unit staffing shall be in alignment with current King County EMS Mobile Integrated Healthcare Services Program Guidelines.

C. Reports:

- i. Submit reports in accordance with the frequency requested in Exhibit D – Evaluation Measures. All reports to include raw data in a format agreed upon by both Agency and KCEMS. Data related to reports must include the data elements included in Exhibit D – Evaluation Measures.



## Exhibit A

### D. Invoices:

- i. Submit an invoice (see Exhibit C - Invoice) on a quarterly basis.
- ii. Invoices must be signed originals and mailed. Facsimiles and e-fires will not be accepted.
- iii. Mail invoices to Erik Friedrichsen, King County EMS, 401 Fifth Ave, Suite 1200, Seattle, WA 98104, no later than 15 days after the end of the calendar quarter, with the following exception:
  1. An estimated invoice for all reimbursable expenses through December 31, 2020, must be submitted by December 15, 2020.
- iv. Submit a roster of personnel who staffed the vehicle for each day/shift during the quarter for which the invoice is dated.

### E. Data Completion and Evaluation:

- i. Agency should make every effort to ensure accurate documentation and data entry for each patient, tracking appropriate information including primary contact address, phone numbers, and relevant medical data.
- ii. Maintain a CARES documentation system consistent with the identified evaluation measures (see Exhibit D - Evaluation Measures).
- iii. Meet regularly with the KCEMS-led CARES Program Management Team to address any operational issues that arise.
- iv. Communicate with other EMTs to improve the function of the project.
- v. Participate in semiannual assessments of the program via surveys and/or interviews of personnel who staffed the CARES unit and fire department administrators involved in overseeing activities described in this Scope (informed consent will be obtained for all interviews).

### 5. Public Health—Seattle & King County, Emergency Medical Services Division, shall:

- A. Reimburse Agency for expenses related to the Agency CARES Program, per Exhibit B – Budget.
- B. Facilitate regular meetings of the CARES Program Management Team to maintain communication and partnership with the Agency regarding all contract-funded activities.
- C. Conduct a program evaluation and data analysis of the CARES program and report findings to the Agency, King County EMS Advisory Committee (EMSAC) and other entities as requested

Public Health—Seattle & King County  
King County Emergency Medical Services (KCEMS) Division

**EXHIBIT A – SCOPE OF WORK AND REPORTING**  
South King Fire and Rescue

1. Identification Information:

- A. Fire Department: South King Fire and Rescue
- B. Fire Department Administrator: Fire Chief Allen Church
- C. Agency Contract Monitor
  - Name: Assistant Chief Gordon Goodsell
  - Phone: 253-839-6234
  - Fax: NA
  - E-mail: [Gordon.Goodsell@southkingfire.org](mailto:Gordon.Goodsell@southkingfire.org)
  - Remit Address: ATTN: Gordon Goodsell
  - South King Fire & Rescue
  - 31617 1<sup>st</sup> Ave S
  - Federal Way, WA 98003
- D. King County EMS Contact
  - Name: Erik Friedrichsen
  - Phone: 206-263-1457
  - Fax: 206-296-4866
  - E-mail: [Erik.Friedrichsen@kingcounty.gov](mailto:Erik.Friedrichsen@kingcounty.gov)

2. Purpose:

This contract is intended to reimburse Agency up to the specific contract amounts (see Exhibit B-Budget), for participation in the Mobile Integrated Health (CARES) program. This contract covers activities described below between the dates of 1/1/2020 and 12-31-2020 Reimbursement requested via this contract should not also be requested for reimbursement under the current Basic Life Support contract with King County Emergency Medical Services (KCEMS).

3. Eligible Costs:

Costs eligible for reimbursement, through this contract include:

- A. Staffing of the CARES unit.

4. The Agency shall:

A. General:

- i. Comply with all requirements as specified in current Basic Life Support (BLS) contracts with KCEMS.

B. Cares Unit Staffing

- i. Staffing shall be in alignment with current King County EMS Mobile Integrated Healthcare Services program Guidelines

C. Vehicles and Equipment:

- i. Utilize a light-duty vehicle (e.g., small SUV, van, etc.) with necessary medical kits to provide standard BLS care pursuant to King County BLS Patient Care Guidelines.

- D. Reports:
- i. Submit reports in accordance with the frequency requested in Exhibit D – Evaluation Measures. All reports to include raw data in a format agreed upon by both Agency and KCEMS. Data related to reports must include the data elements included in Exhibit D – Evaluation Measures.
- E. Invoices:
- i. Submit an invoice (see Exhibit C - Invoice) on a quarterly basis.
  - ii. Invoices must be signed originals and mailed. Facsimiles and e-fires will not be accepted.
  - iii. Mail invoices to Erik Friedrichsen, King County EMS, 401 Fifth Ave, Suite 1200, Seattle, WA 98104, no later than 15 days after the end of the calendar quarter, with the following exception:
    - 1. An estimated invoice for all reimbursable expenses through December 31, 2020, must be submitted by December 15, 2020.
  - iv. Submit a roster of personnel who staffed the vehicle for each day/shift during the quarter for which the invoice is dated.
- F. Data Completion and Evaluation:
- i. Agency should make every effort to ensure accurate documentation and data entry for each patient, tracking appropriate information including primary contact address, phone numbers, and relevant medical data.
  - ii. Maintain a CARES documentation system consistent with the identified evaluation measures (see Exhibit D - Evaluation Measures).
  - iii. Meet regularly with the KCEMS-led CARES Program Management Team to address any operational issues that arise.
  - iv. Communicate with other EMTs to improve the function of the project.
  - v. Participate in semiannual assessments of the program via surveys and/or interviews of personnel who staffed the CARES unit and fire department administrators involved in overseeing activities described in this Scope (informed consent will be obtained for all interviews).
5. **Public Health—Seattle & King County, Emergency Medical Services Division, shall:**
- I. Reimburse Agency for expenses related to the Agency CARES Program, per Exhibit B
  - ii. Facilitate regular meetings of the CARES Program Management Team to maintain communication and partnership with the Agency regarding all contract funded activities.
  - iii. Conduct a program evaluation and data analysis of the CARES program and report findings to the Agency, King County EMS Advisory Committee (EMSAC) and other entities as requested

**EXHIBIT B - BUDGET**  
Valley Regional Fire Authority

Item	Year	Budget	Specifics/Rationale
Community Medical Technician Program	2020	\$ 202,070	For work and expenses eligible for reimbursement, as defined in Exhibit A – Scope of Work, beginning January 1, 2020, ending December 31, 2020.
<b>Total Contract Budget</b>		<b>\$ 202,070</b>	

**EXHIBIT B - BUDGET**  
South King Fire and Rescue

Item	Year	Budget	Specifics/Rationale
Community Medical Technician Program	2020	\$ 357,000	For work and expenses eligible for reimbursement, as defined in Exhibit A – Scope of Work, beginning January 1, 2020, ending December 31, 2020.
<b>Total Contract Budget</b>		<b>\$ 357,000</b>	

Exhibit C  
Public Health—Seattle & King County  
King County Emergency Medical Services (KCEMS) Division

**EXHIBIT C – INVOICE AND BUDGET SUMMARY – SAMPLE ONLY**  
Valley Regional Fire Authority or SKFR

January 1, 2020, through December 31, 2020

AGENCY:	Valley Regional Fire Authority	DATE:	
REMIT ADDRESS:	1101 D Street NE	CONTACT:	DC Dave Larberg
Auburn	WA	98002	PHONE: 253-288-5800
CITY	STATE	ZIP	

**\*\*PLEASE COMPLETE BOTH SECTIONS\*\***

Budget Category	Contract Budget	Item/Description	Funds Expended this Report	Total Funds Expended to Date (include current report)	Total Funds Remaining
Regional Support Services – Community Medical Technician	\$	Wages and Expenses Eligible for Reimbursement	\$	\$	\$
<b>TOTAL</b>	\$		\$	\$	\$

Accomplishment Report

Type of Activity	Goal	Current Report	Total to Date (include current report)

CARES ROSTER REPORTING

The following individuals (name and rank) staffed [CARES##] during the period covered by this invoice:

Submit to: ATTN: Erik Friedrichsen King County Emergency Medical Services 401 Fifth Ave, Suite 1200 Seattle, WA 98104
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Exhibit C

CERTIFICATION FOR PAYMENT:

I, the undersigned, do hereby certify that the materials have been furnished, the services rendered or the labor performed as described herein, and that the claim is a just, due, and unpaid obligation against King County, and that I am authorized to authenticate and certify to said claim.

\_\_\_\_\_  
Agency Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

---

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FOR PUBLIC HEALTH—SEATTLE & KING COUNTY USE ONLY

APPROVED:

\_\_\_\_\_  
Program Manager

\_\_\_\_\_  
Date

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Public Health—Seattle & King County  
King County Emergency Medical Services (KCEMS) Division

**EXHIBIT D – Evaluation Measures**  
Valley Regional Fire Authority

**Evaluation Measures**

The Regional CARES Workgroup identified the following measures to be tracked and evaluated across all CARES-participating agencies. Listed below are the metrics along with descriptions and definitions and frequency of reporting for the CARES unit. The metrics are further categorized by responsible party for gathering data.

Data Collected by Agency via Standard Reporting Methods

Metric	What it Measures	Definition	Frequency of Reporting
Response Time	Length of time to respond to 911 call	Difference between Arrival Time & Dispatch Time	Per Normal
On Scene Duration	Length of time spent with patient at the scene	Difference between Close Time & Arrival Time	Per Normal
Transports	Transport of the patient from the location of call; includes BLS (fire), ALS (paramedics), private ambulance, private vehicle, and taxi	Number of times patient was transported from scene, broken down by transport agency/type	Per Normal
Transport Destination	Distribution of destination locations for transported patients	Destinations include Emergency Department, Urgent Care, Primary Care Provider Office or Other Clinic, Sobering Center, Detox Center	Per Normal
Top Dispatches by IDC	The types of responses to which the unit is dispatched	Frequency counts of Initial Dispatch Codes (IDCs) for unit responses	Per Normal

Data Collected by Agency via Additional Reporting Methods

Metric	What it Measures	Definition	Frequency of Reporting
Referrals	Number of times the CARES refer individuals to community resources	Number of referrals attempted will be counted as well as those that were declined by the patients	Monthly
BLS Unit Availability	The number of minutes CARES spent on low-acuity medical calls	The number of minutes BLS units spent on low-acuity medical calls	Quarterly



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Requests from Scene	CARES requests for assistance from scene	BLS Request = requesting BLS unit for lift assist, transport, etc. ALS Request = requesting paramedics for assessment, transport, etc.	Monthly (immediate notification for all ALS upgrades)
CARES Unit Utilization/Reliability	The percentage of the eligible AIDSVIC calls to which the CARES unit was dispatched	Eligible Initial Dispatch Codes include the "Yellow" IDCs and dispatched "T" IDCs	Quarterly
CARES Role	CARES performs CARES role as the primary or secondary responder to a low-acuity call, as "Extra Hands" to nearby critical calls, or as a non-dispatched "Special Service" case	Number of times the CARES unit responded in the various roles	Monthly
Special Services	Utilization of the Special Services	Number of times the CARES engaged with individuals in non-dispatched "Special Services" role as part of follow-up after a 911 call	Quarterly
CARES Safety	General measure of CARES safety concerns during 911 responses	Percent of CARES who encountered a specific safety issue during a response	Quarterly

Data Collected by KCEMS via Additional Reporting Methods

Metric	What it Measures	Definition	Frequency of Reporting
Patient Satisfaction	Satisfaction of patients seen by CARES across several components	Components of satisfaction include overall satisfaction, response time satisfaction, and on scene duration satisfaction	Provided by KCEMS to Agency - Semiannual
BLS Unit Availability*	Availability of BLS units to respond to other 911 fire and medical emergencies	Number of times the CARES unit was on a call, allowing a BLS first-due unit to respond to another 911 call	Provided by KCEMS to Agency - Annual
Thoughts and Impressions – Responders & Admin	Qualitative measurements of the program; general thoughts and impressions, utility, value of the program	Surveys and interviews of personnel who staff the CARES unit and FD administrators	Provided by KCEMS to Agency - Semiannual

\*Analysis and reporting of BLS Unit Availability, as defined in the above table, is subject to data availability and may not be included in final evaluation.

Exhibit E

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Community Medical Team (CMT)  
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South King CARES Organization Chart 2020

