

BACKGROUND

In March 2020, the COVID-19 Pandemic takes a grip on Eastern Oregon. In response to the statewide pandemic, the Governor's Office declares a "state of emergency". In response to the state of emergency and delay in ambulance response, Boardman Fire responds to EMS call.

ORS Chapter 478.260 – (4) A district may operate or acquire and operate, or contract for the operation of, emergency medical service equipment and vehicles both within and without the boundaries of the district.

BFRD requests MCHD partner in an effort improve both EMS delivery and firefighting capabilities.

682.041 Legislative intent regarding regulation of ambulance services. The Legislative Assembly declares that the regulation of ambulance services and the establishment of ambulance service areas are important functions of counties, cities and rural fire protection districts in this state. It is the intent of the Legislative Assembly in ORS 478.260, 682.027, 682.031, 682.041, 682.062, 682.063 and 682.066 to affirm the authority of counties, cities and rural fire protection districts to regulate ambulance services and areas and to exempt such regulation from liability under federal antitrust laws.



How is your organization best positioned to provide ambulance services in the County?

- Currently providing ambulance service countywide
 - Northern ASA 2 ALS Ambulances and 2 BLS Ambulances
 - North East ASA 1 ALS Ambulance, additional ambulance auto backfill
 - Southern ASA 1 ALS Ambulance, additional ambulance auto backfill



How does your plan change if you are awarded one, two or all three Ambulance Service Areas?

- For the Northern and/or North East ASA No change in staffing or response model.
- For the Southern ASA BFRD will have to continue to work on closing the gap with the volunteers to staff a second ambulance.



Please explain your approach to second unit staffing in each of the Areas. What level of ambulance service will be provided? (i.e. ALS or BLS)

- For the Northern and North East ASA Second unit is an ALS, third and forth are BLS
- For the Southern ASA the second unit will be dependent upon the availability of the North end



Please provide your organization's justification of using your proposed shift schedule for coverage. What positives and negatives are there to your chosen shift schedule?

- Industry standard The entire I84 corridor from La Grade to the Dalles uses this model
 - Dual role personnel on 24-hour shifts are more cost effective, reducing taxpayer costs
 - Annual Dual Role on 24-hour shifts \$690,000
 - Annual Single Role on 12-hour shifts \$920,000
 - More productive Business inspections, Hydrant maintenance
 - Direct supervision
 - Increased training
 - Public Education
 - Engine rotation
- Negatives Although rare in Morrow County, multiple night calls on day one
 - Scheduled rest period on day two



What is your approach to the use of QRTs?

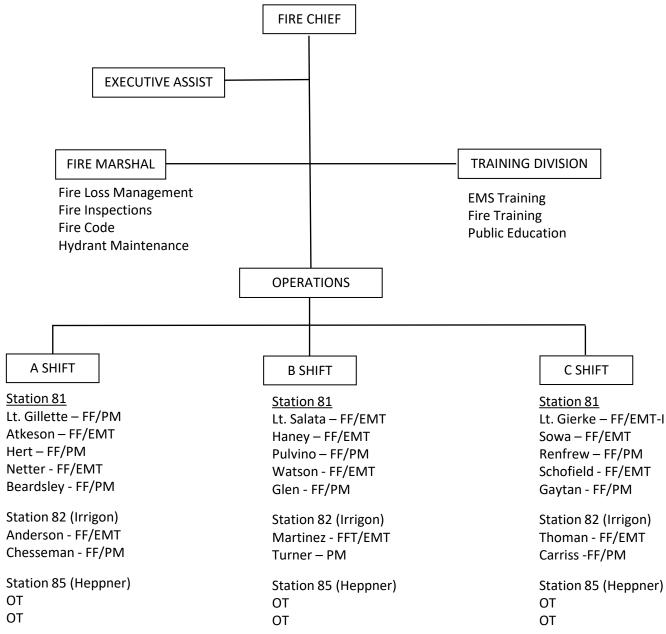
- Northern and North East ASA As the current primary EMS provider, no QRT's are needed.
- Southern ASA In Lexington and Ione QRT's have value as long as they are working within the established system. Responding independently can cause issues.



The staffing list provided with the application does not break down staffing by ASA. Is it truly universal? Will all those personnel be available if your organization is awarded only one or two ASAs? (Next Slide)



BOARDMAN FIRE RESCUE DISTRICT



When could your organization start as a provider? Outside of contract finalization, what needs to happen before that start date?

- Currently providing ambulance service countywide
- Continue with current service model



What is your approach to overcoming the historical bias towards MCHD Ambulance Coverage if BFRD is awarded coverage in the Northeast or Southern ASA?

- Unfortunately MCHD has tied our hands because of the on-going law suit.
- North East Because of the vast distance between the North East and Southern ASA's, if MCHD was providing service to the Southern ASA there would be nearly no interaction between the two entities. Our staff is as professional as they come. If MCHD requested mutual aid to the Southern ASA we would respond as we would for any other request for service. Our mission is to serve our District, County, Region and State.



Please explain BFRD's use of dual role vs. single role personnel. How is this impacted during peak fire seasons and how do you mitigate those impacts?

- Currently BFRD has one modified single role paramedic. Which has no impact on fire operations.
- Additional Firefighters BFRD has seasonal firefighters on staff to reduce fire impact.
- Ambulance Staffing Although ambulance staff are also firefighters, their primary mission is EMS.



What is the impact to the Northern Area if that is the only ASA BFRD is awarded?

- The impact to the Northern ASA would be nil.
- The impact to the North East ASA would be greatly impacted. Dual role personnel currently add initial firefighting assistance to Irrigon Fire



Please explain how BFRD can assure the stability of providing ambulance services. Please specifically address BFRD being a new provider without years of experience and what happens after Chief Hughes retires?

- Ambulance Service Stability Although the organization is "new" to providing ambulance service, our delivery model is a national standard. The fire service has been in place for over 200 years.
- BFRD core EMT and Paramedic staff has an average of 7 years of experience
- Who says I'm retiring.....

