1. The grant materials state that only LEMSAs are eligible, does this include Nor-Cal EMS as a non governmental, 501(C) 3 entity?

Response: Yes.

1. Are we required to go to bid or can we sole source purchase?

Response: Procurement of devices is subject to LEMSA/Local Policy procurement guidelines.

1. Can we refer to the providers and have them tell us their preferred platform and manufacturer?

Response: Yes

1. Who owns the equipment?

Response: The State of California.

1. What is the depreciation schedule of the equipment?

Response: A depreciation schedule has not yet been developed and will depend on the type of devices purchased.

1. If the equipment is not owned by the provider will it become the property of the provider at the end of the depreciation schedule and if so are there restrictions to whom it can be transferred (private or governmental entity)?

Response: The State of California owns the equipment until it is transferred to grant recipient.

1. What are the limitations on personnel/administration/training/implementation costs?

Response: Grant funding can only be used for the purchase of devices.

1. What are the equipment replacement requirements if any?

Response: Grantees are required to submit to the EMS Authority a written plan that addresses the loss, recovery, replacement, or redistribution of purchased devices within 30 days of purchase of devices.

1. Can we include in the project funding the use of Elite Field for ImageTrend users ($1 per call)?

Response: No.

1. Can the project pay for a Wi-Fi Hotspot for the emergency vehicle?

Response: Grant funding can only be used for the purchase of devices.

1. Can the project pay for a data plan for the provider permitting data to be transferred from the field?

Response: Grant funding can only be used for the purchase of devices.

1. Do funds include integrating existing EKG monitors so that data can be imported into ImageTrend Elite Field?

Response: Grant funding can only be used for the purchase of devices.

1. If questions arise as the result of the answers to our questions, how will they be addressed?

Response: Any follow-up questions will be considered on a case by case basis.

1. The award date is 2/1.  What is the expected timeframe for contract execution from you to us, (after

which we must get approvals and take to our Board of Supervisors for final signing)?  Will there be an expected timeframe for you to receive a signed contract back from us?

Response: The expected timeframe for contract execution is typically 4-6 weeks.  The expected timeframe for returning copies to the State is within 15 business days.  This timeframe is adjusted as necessary if the Contractor has to obtain Board of Supervisors approval, is dependent upon the meeting schedule, and should be communicated to the State.

1. Once the award is made, I am assuming the amount being awarded will be noted.  Is there a chance, after being notified of an award amount, that the amount stated will be reduced?  Bottom line:  We are concerned about being told of an amount, making purchases in that amount, then not getting reimbursed?  If this is the case, I need to let the provider and my bosses know ahead of time.

Response: The award amount will not be changed once notification is made. The contract is not considered binding until signed by both parties and reimbursement will not be made for devices purchased prior to the contract execution date.

1. Page 5 of 14, item g. states “…under sealed cover…”  What does this mean?  Does it mean shrink wrapped?

Response: The responses must be received in a sealed envelope/box to be opened by EMSA.

1. Page 6, section E, Scope of Work states:  “The LEMSAs will purchase the devices…”  Does this mean that we cannot ask the ambulance provider to purchase it, and then get reimbursed from us and follow all of our tracking mechanism and other items?  The county has to make the actual purchase?

Response: The LEMSA can purchase the devices or have the provider purchase the devices under a separate agreement. The provider would submit a reimbursement request to the LEMSA who in turn would bill the State. The LEMSA is responsible to maintain all other terms and conditions of the grant with regard to accountability of the devices regardless if purchase is made by LEMSA or provider.

1. If the county has to do the actual purchasing, are we required to do so before January 18 or can we wait until we find out the award amount and recipient qualification?

Response: The County does not have to make the purchase if a separate agreement is made with the provider; however, the devices should not be purchased until a fully executed contract is signed by both parties.

1. Page 7, item 3:  can our training plan delegate the training development and actual training to the provider, as long as the requirements are met, we approve of the entire plan, and we require them to do this?

Response: The LEMSA will ultimately need to provide EMSA with the training plan; however, the LEMSA can have the provider carry out that responsibility with LEMSA approval.

1. Page 8, item 6:  what information does a quarterly status report contain?

Response: A quarterly status report (due January 15, April 15, July 15, and October 15) detailing where the LEMSA or providers are in their procurement and implementation of the ePCR devices, status update of the deliverables listed in the agreement, explanation of any challenges or special accomplishments resulting from the use of ePCR devices, and any other relevant data/information on the project.

1. Application checklist:  Do you have a sample of a “Support letter from EMS provider” or have a list of

points you want included?

Response: No.

1. STANDARD AGREEMENT form:  are we completing this form and submitting it with the packet, or is

this just for reference?  If we are submitting it, is the term of the contract 2/1/17 through 9/30/17?  How do we know the max amount?  I’m suspecting this comes after the award…

Response: The Standard Agreement is included for reference purposes only and does not need to be completed.

1. There are reference to devices, and there are references to other types of costs.  Will costs other than devices be potentially covered, such as installation, training, protective covers for the devices, software costs? Are there any other costs that might be covered that I didn’t list?

Response: Grant funding can only be used for the purchase of devices.

1. Exhibit D, Special Terms and Conditions, Item 4 License and Permits:  speaks to business

licenses.  Since we are a county, I don’t think we have one of these (I could be wrong).  What would we need to provide for this?

Response: Not applicable - this item does not apply to Counties/local governments.

1. For Attachment B, Device Assessment Worksheet, do we list our Fire JPA as one entity, or do we list each member agency separately?

Response: Providers should be listed separately for more accurate tracking of individual provider status with regard to ePCR capabilities.

1. For Attachment B, Device Assessment Worksheet, the column header says:  “Number of Ambulances in fleet”.  If we are requesting devices for a fire agency who does not have ambulances, do we list number of apparatus which require ePCR capability?

Response: Yes, the total number of vehicles should be listed for any given provider.