



**Date of Issuance:** June 10, 2022

**Solicitation No.** 3400001752

**Requisition No.** 34000001752

**Amendment No.** 2

Hour and date specified for receipt of offers is changed:  No  Yes, to: June 24, 2022 3:00 PM CST

Pursuant to OAC 260:115-7-30(d), this document shall serve as official notice of amendment to the solicitation identified above. Such notice is being provided to all suppliers to which the original solicitation was sent.

Suppliers submitting bids or quotations shall acknowledge receipt of this solicitation amendment prior to the hour and date specified in the solicitation as follows:

Sign and return a copy of this amendment with the solicitation response being submitted; or,

If the supplier has already submitted a response, this acknowledgement must be signed and returned prior to the solicitation deadline. All amendment acknowledgements submitted separately shall have the solicitation number and bid opening date in the subject line of the email.

**ISSUED FROM:**

Ruby Sherwan  
Contracting Officer

405-816-6645  
Phone Number

rubys@heath.ok.gov  
E-Mail Address

**RETURN TO:** Oklahoma State Department of Health  
123 Robert S. Kerr Ave., Ste 1702  
RFP #1752, Attn: Ruby Sherwan  
Oklahoma City, OK 73102

**Description of Amendment:**

a. This is to incorporate the following:

- 1. *The closing date has been extended to June 24, 2022, 3:00 PM.***
- 2. Replace revised section 1.0, Subsection I on Amendment #1 (RFP), with the following:**
  - Section 1- General Information and Project Requirements
  - Section 2 - Qualified Entity, Local Need and Support, Availability of Assistance, Project Feasibility, Statewide Need and Public Interest
  - Section 3 - Statutory Purpose
  - Section 4 - Multiple Jurisdictions
  - Section 5 - Population Density
  - Section 6 - Distance to Trauma Center
  - Section 7 - Number of EMTs in project area
  - Section 8 - Amount of Funding Requested
  - Section 9 - Project Matching
  - Section 10 - Budget / Proposed Expenditures
  - Section 11 - Previous Funding Assistance
  - Section 12 - Previous Funding Evaluation
  - Section 13 - Benchmarks
- 3. Replace Return Address on Amendment #1 to:**
  - Oklahoma State Department of Health
  - 123 Robert S. Kerr Ave., Ste 1702
  - RFP #1752 Attn: Ruby Sherwan
  - Oklahoma City, OK 73102

4. Replace meeting date that appears before Q1 on Amendment #1 to Wednesday, May 25, 2022.
5. Replace Q11 on Amendment #1 with the following: "Do you know what the deadline for the Grant Proposal is? I checked the website today and realized the Q&A process is not completed yet. Just trying to understand the timeline. A11 The proposal deadline is June 17, 2022."
6. Replace "A14, 15, 16 & 17 Revised RFP has been attached due to the number of errors" on Amendment #1 with "A15, 16, 17 & 18 Revised RFP has been attached due to the number of errors."
7. Replace the section that begins, "Attachment C-1" on Amendment #1 to the following: "Attachment C-1 FY 2023 Response to the request for proposals and solicitation for OERSSIRF has been renumbered as Attachment A."
8. Replace reminder section on signature page of Amendment #1 with the following: "Do not forget to Tab Section A. If not tabbed, your response will be deemed non-responsive and not evaluated."

**REMINDERS:**

- ***The closing date has been extended to June 24, 2022, 3:00 PM.***
- Please remember to tab your responses, otherwise they will be deemed non-responsive and not evaluated.
- Signed copies of all amendments must be included in your response.

b. All other terms and conditions remain unchanged.

\_\_\_\_\_  
Supplier Company Name (**PRINT**)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Representative Name (**PRINT**) Title

\_\_\_\_\_  
Authorized Representative Signature

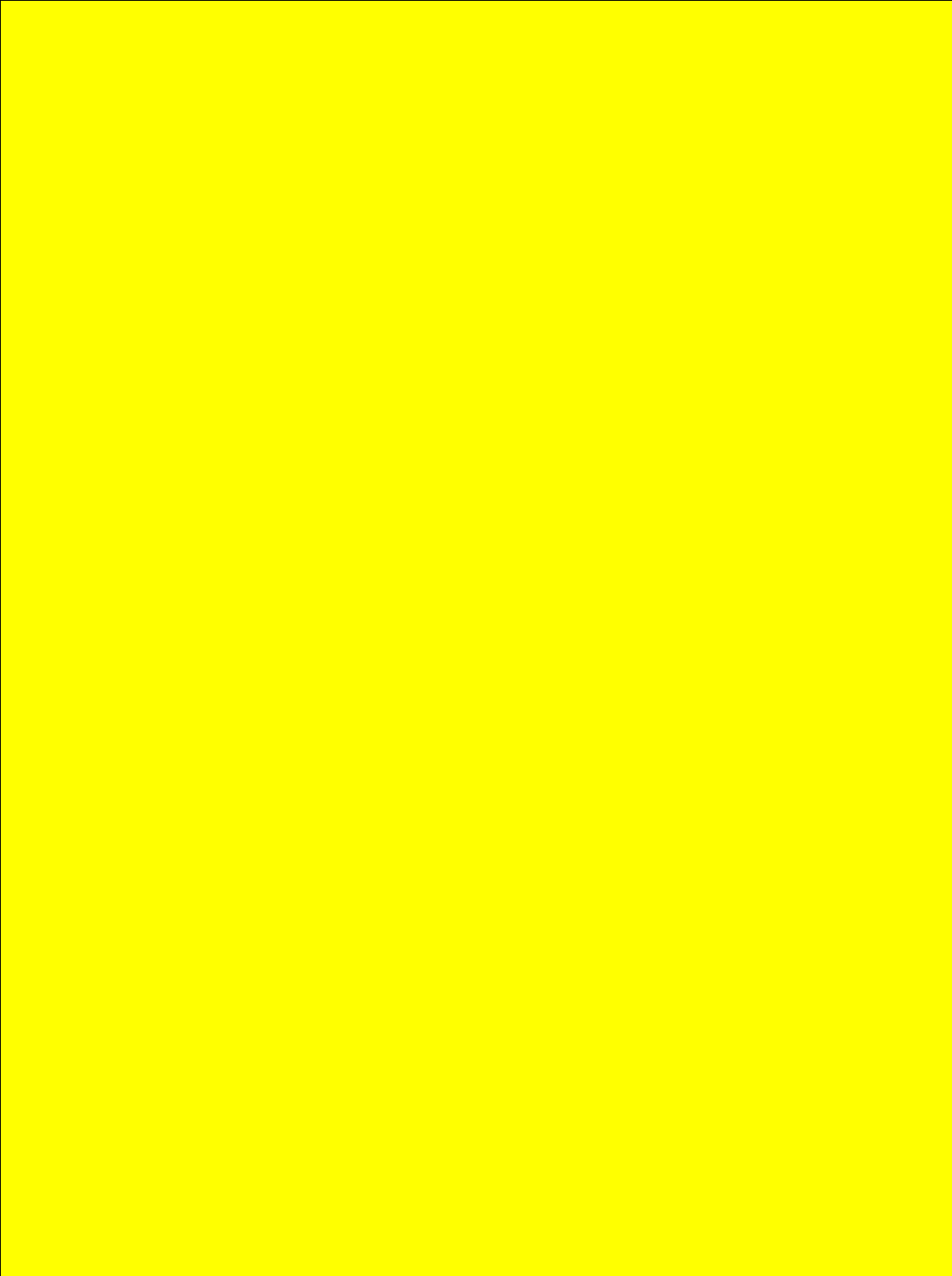
<b>Attachment A FY 2023 Response to the Request for Proposals and Solicitation for OERSSIRF</b>					
Section 1 - General Information and Project Requirements					
Name of Submitting Entity:					
Project Number (if more than one response is submitted)					
Total Project Amount (matching + requested \$ =)					
Requested OERSSIRF Amount					
Mailing Address of Submitting Entity					
Entity Phone Number					
Contact Name					
Contact Phone Number					
Contact Email Address					
<b>Demographic Questions</b>					
<p>The submitting entity is asked, BUT NOT REQUIRED, to provide the following information. A score will not be assigned to any of the submitted information. However, the information may be useful to the review panel. If some of the requested information is not applicable, enter NA. In cases where more than one response to a question is applicable, check all that apply.</p>					
Certification and Licensure Level of Emergency Medical Personnel at the submitting entity					
EMR			BLS		
Intermediate			Advanced EMT		
Paramedic			Specialty Care or Critical Care		
Number of response vehicles (EMRA Response Vehicles or Ambulances)					
Number of substations or posts operated by the entity					
Number of responses in CY 2021					
How is the agency funded?					
Charges		Sale Tax		Subscriptions	
Property Tax		Utility Assessments		Other	
<b>FY 2023 OERSSIRF Attachment C-1 and supporting documentation is to be limited to 55 pages.</b>					
<b>See Guidebook for additional details and explanations. (page 8)</b>					

<b>Section 2 Part A Statutory Eligibility (63 O.S. 1-2512.1)</b>			
<p>The proposed project must comply with 63 O.S. 1-2512.1. The applicant must possess all necessary and incidental legal rights and privileges for project commencement and completion. The application must reflect the eligibility as well as statutory purposes of the project.</p>			
<p><b>These requirements must be documented in Section 2 of the application. Proposals that do not meet the statutory requirements will be returned to the applicant.</b></p>			
<b>Section 2 Part A - Qualified Entity</b>			
<p>Qualified Entity (check applicable boxes) O.A.C. 310:641-1-3:</p>			
EMS Personnel	<input type="checkbox"/>	Emergency Medical Dispatch	<input type="checkbox"/>
Certified Emergency Medical Response Agency	<input type="checkbox"/>	Approved Medical Director	<input type="checkbox"/>
Licensed Ambulance Service	<input type="checkbox"/>	An Association	<input type="checkbox"/>
Approved Training Institution	<input type="checkbox"/>	Sponsoring Agency	<input type="checkbox"/>

A sponsoring agency can be an EMS District; a city or county operating a certified emergency response; a licensed ambulance service; an education system operating EMS training institutions, etc. Explain qualifying relationship or criteria below:

<b>Section 2 Part B. Local Need, Support, and Priority (310:641-3-1 (c) (3))</b>
<p><i>"The applicant shall demonstrate that the project is needed in the area to be served and is sufficient, as proposed, to serve such needs. Applicant shall demonstrate local support, interest and commitment in and to the proposed project."</i></p>
<p>(a) The qualifying entity must demonstrate the project is needed in the area to be served, as supported by needs identified in a needs assessment. The description of the project must clearly show how the project will appropriately address the identified need(s), and include the assessment referencing the project needs.</p>
<p>(b) The qualifying entity must demonstrate local support, interest, and commitment to the proposed project. Letters from the involved entities (e.g. cities, counties, companies shall be included, as applicable.</p>
<p>Please use the space below to describe the project, the local needs, support and priority. Additional documentation may be attached.</p>

**Section 2 Part B. Local Need, Support, and Priority (310:641-3-1 (c) (3)) (continued)**



<b>Section 2 Part C. Availability of other Assistance (310:642-3-1 (c) (4))</b>
Applicant shall demonstrate appropriate due diligence to ensure no alternative sources of revenue could be obtained and utilized for project financing.
Efforts to determine alternative sources of revenue must be documented in a narrative summary. Identify all measure and efforts to seek alternative funding sources.
The documentation for alternative sources of funding is to include, but not be limited to: (a) formations of "522" or Ambulance Service Districts; (b) formation of Title 19 Funding District, (c) Additional Public Monies, (d) Grants.
Please use the space below to describe steps taken to identify additional resources. Additional documentation may be attached.

<b>Section 2 Part D. Project Feasibility (310:641-3-1 (c) (5) and (6))</b>
Applicant shall not be considered an expert or financial consultation for the purpose of attesting to project feasibility and cost-effectiveness.
Application will be reviewed prior to scoring to ensure guidance was followed.
<u>"The Department shall be under a continuing obligation to ensure the following standards and criteria are satisfied before any proposal is approved for funding and may determine compliance with these standards and criteria during preliminary review, scoring and selection, or during a post selection review."</u>
Applicant must demonstrate the project is feasible and cost effective. The project description shall establish all items to be completed and purchased during the project period. All items to be purchased must be detailed in the Budget Section and Benchmark Section.
Documentation must be provided that demonstrates purchasing timetables and costs for all project items.
Appropriately credentialed expert or consultant must provide attestations to the feasibility and cost-effectiveness of the project must be provided. Credentials of financial consultant(s) and expert(s) shall be submitted with attestation(s).

<b>Section 2 Part E. Statewide Needs and Public Interest. (310:641-3-1 (c) (7))</b>
Applicant must show how the project will serve the public interest and welfare by demonstrating the relationship between the project and "Stabilization and Improvement" within the State of Oklahoma, as identified in a needs assessment.
Needs Assessments may include reports from Bishop and Associates, National Highway Transportation and Safety Administration, OSU Cooperative Extension Service, or other reports regarding EMS.
Attestations of the benefits of the project to the public interest and welfare shall be provided by an appropriately credentialed consultant or other expert. Credentials of financial consultant(s) and expert(s) shall be submitted with the attestations(s).
The applicant shall not be considered an expert or financial consultant for the purpose of attesting to the project need. Real and potential conflicts of interest will need to be declared in the attestation with steps taken to address the conflicts. Application will be reviewed prior to scoring to ensure guidance was followed.

**Section 2 Part E. Statewide Needs and Public Interest. (310:641-3-1 (c) (7)) (Continued)**

Use the area below to describe the needs assessment process and documentation.

Additional Attestations or supporting documentation may be attached.

Amendment 2

<b>Section 3 - Statutory Purpose(s) (Check all applicable activities)</b>
Statutory Reference (63 O.S. § 1-2512.1)
....All monies accruing to the credit of the fund are hereby appropriated and may be budgeted and expended by the Department for the purpose of funding assessment activities, stabilization and/or reorganization of at-risk emergency medical services, development of regional emergency medical services, training for emergency medical directors, access to training front line emergency medical services personnel, capital and equipment needs.
Regulatory Reference and Scoring (O.A.C. 310:642-5-1 OERSSIRF funding priority point system (2) (A) Statutory purposes (S): (i) - (vi))
Points shall be awarded for each of the relevant statutory purposes of the proposal as follows:

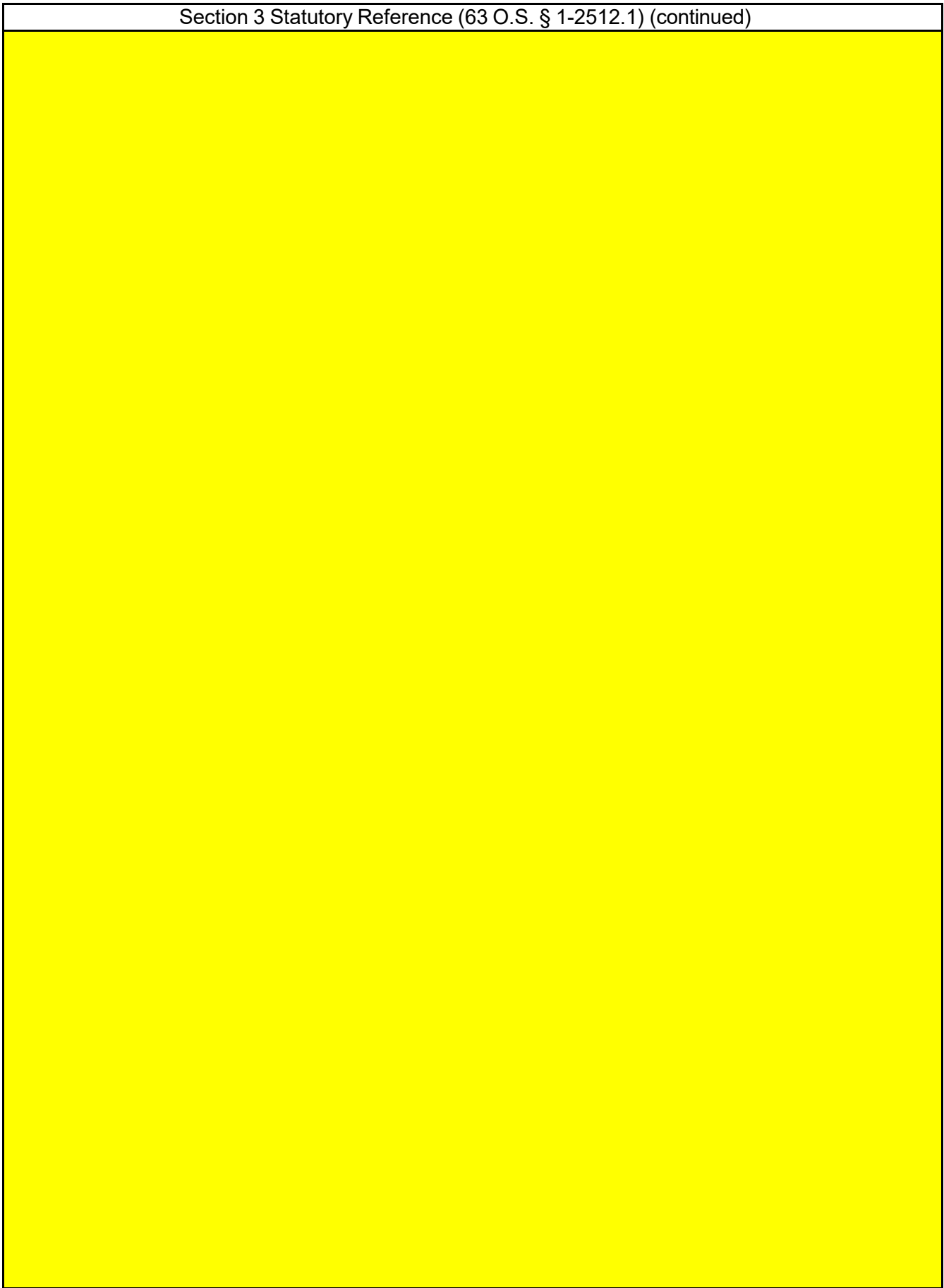
<b>All applicable statutory purposes must be included in the Benchmark Section.</b>		
Statutory Purpose	Value	Is this part of the Proposal ?
Funding Assessment Activities	50 Points	
Stabilization and/or Reorganization of At-Risk Emergency Medical Services	100 Points	
Development of Regional Emergency Medical Services	50 Points	
Training for Emergency Medical Director	50 Points	
Access to Training for Front Line Emergency Medical Services Personnel	100 Points	
Capital and Equipment Needs	50 points	

<b>Applicant Self Score</b>	
-----------------------------	--

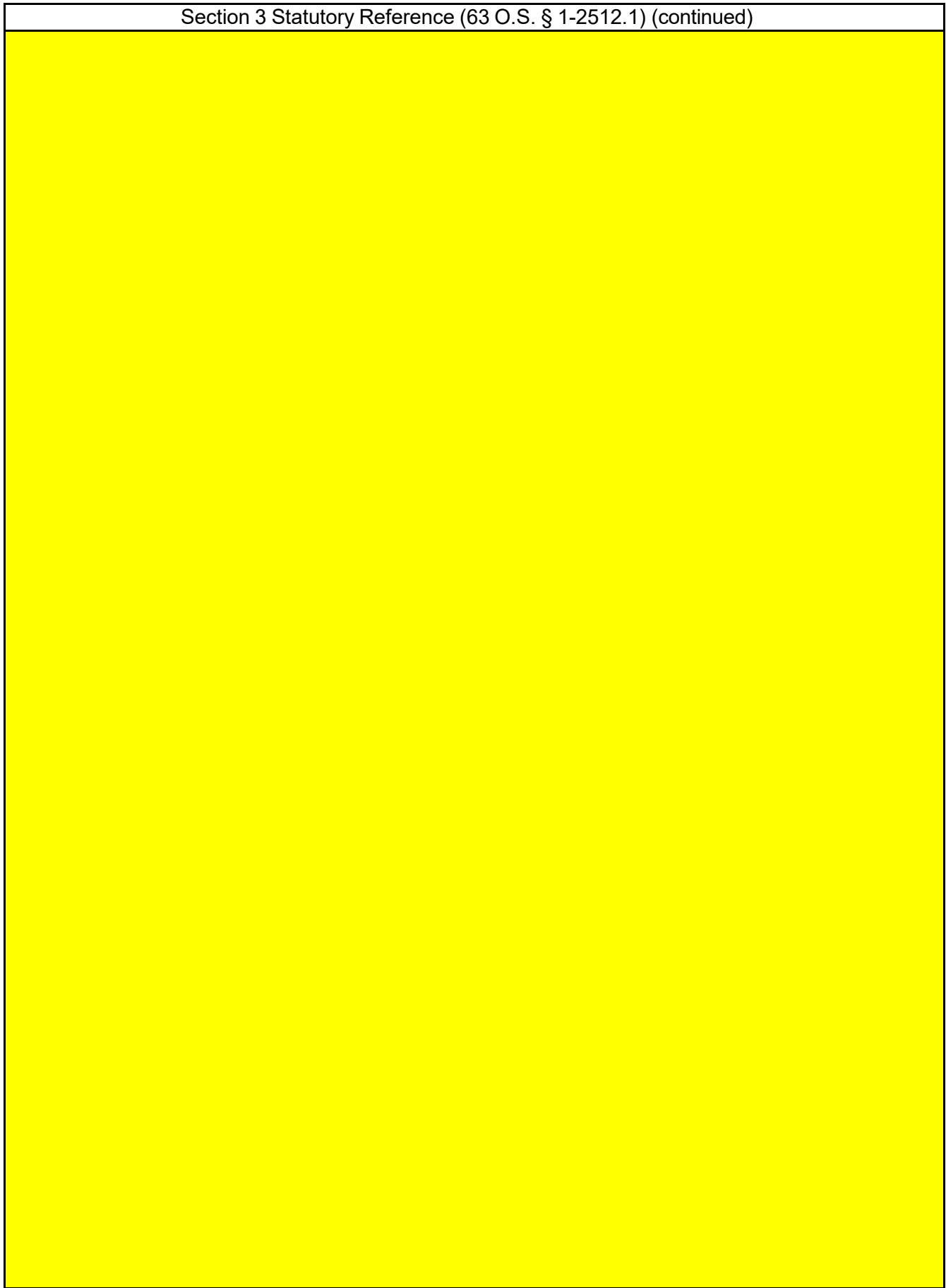
Statutory Reference (63 O.S. § 1-2512.1)
In narrative form, describe the project statutory purpose(s) and include any documentation that supports the awarding of points for the Statutory Purpose(s). Continue on next page



Section 3 Statutory Reference (63 O.S. § 1-2512.1) (continued)



Section 3 Statutory Reference (63 O.S. § 1-2512.1) (continued)



Amendment 2

**Section 4 - Multiple Jurisdictions**

O.A.C. 310:642-5-1 (2) (B) states: *Points shall be awarded for projects addressing the EMS needs of multiple jurisdictions, as follows:*

If more than one jurisdiction will benefit from the project, list them all and describe the proposed benefits.

Include a map and highlight jurisdictions benefitting from the project. For every jurisdiction included in the Proposal, documents that verify their inclusion and/or support must be submitted.

JURISDICTIONS	Points	√	<b>Applicant Self Score</b>
Two Cities or Towns	25		
Three Cities or Towns	50		
County Wide	100		
Multi-County	150		
State Wide	200		

**Section 5 - Population Density**

Source document for population density

<https://www.census.gov/programs-surveys/decennial-census/decade/2020/2020-census-results.html>

Link to Population Density by Zip Code:

<https://oklahoma.gov/content/dam/ok/en/health/health2/aem-documents/protective-health/emergency-systems/oerssirf/fy2023/FY%202023%20Population%20Density.pdf>

O.A.C. 310:642-5-1 (2) (C) states: *Points shall be awarded for projects encompassing areas of lowest per-mile population density as recorded by the United States Census Bureau, as follows:*

The population density of the proposed project area shall be determined by the zip codes within the posed project area. Use the link above to go to the OSDH OERSSIRF Page. The Document detailing Population Density for all reported zip codes in Oklahoma. To determine the population density for the project, identify all zip codes in the proposed and find the population density detailed on the Document

Enter all Zip Codes and their corresponding Population Density in the fields below.

The score for this section will be the zip code in the proposed area with the lowest population density.

If the Proposal is for a state wide project, the population will be 57.7 persons per square mile.

Zip Code	Population Density	Zip Code	Population Density

Scoring Criteria	Points	√	Applicant Self Score
Less than 10/mile	100		
10/mile to 29.9/mile	50		
30/mile to 79.5/mile	40		
79.6 to 199.9/mile	30		
200/mile to 999.9/mile	20		
1000/mile to 4,999.0/mile	10		
5,000.00/mile to 8,968.1/mile	0		

**Section 5 Population Density (continued)**

In narrative form, use this page to describe the Multiple Jurisdictions and Population Density within this proposal. Include any documentation that supports the awarding of points for the Multiple Jurisdiction and Population Density.

Amendment 2

<b>Section 6- Distance to trauma center</b>		
<i>O.A.C. 310:642-5-1 (D) Points shall be awarded for project areas where the average distance between the furthest and closest points within the project area to a trauma center classified by the State of Oklahoma or the American College of Surgeons as level I or II, as follows:</i>		
Level 1 and Level II Trauma Centers are located in Oklahoma City and Tulsa, respectively. The <b>OU Medical Center, 700 NE 13th Street, Oklahoma City, OK 73104</b> <b>St. John Medical Center, 1923 South Utica Avenue, Tulsa, OK 74104</b> <b>St. Francis Hospital, 6161 South Yale, Tulsa, OK 74136</b> Utilize MapQuest to determine distances within the proposed project area. <b>website: <a href="https://www.mapquest.com/">https://www.mapquest.com/</a></b>		
Determine the most distant point with a physical address within the proposed project area from the closest Level 1 or Level II Trauma Center		Most Distant Point - Address
		Miles to Closest Trauma Center
Determine the closest point with a physical address within the proposed project area from the closest Level 1 or Level II Trauma Center		Closest Point - Address
		Miles to Closest Trauma Center
Average distance within proposed area to the closest Trauma Center		

Scoring Criteria	Points	√		<b>Applicant Self Score</b>
0-25 Miles	0			
25 to 49 Miles	10			
50-74 Miles	20			
75 - 99 Miles	30			
100 - 124 Miles	40			
125-149 Miles	50			
150 Miles and over	100			

Statewide projects use 171.9 miles as the average distance to the Closest Trauma Center in OK

Include copies of the MapQuest maps, routes, and distances used to support the awarding of points for this section. A narrative description may also be included below.



Amendment 2

<b>Section 9 - Project Matching</b>	
<i>O.A.C. 310:641-5-1 (G) states: If the proposal proposes the use of matching funds, points shall be awarded consistent with the following formula:</i>	
Matching fund formula: Total encumbered matching dollars / total project amount = % of matching dollars. Encumbered matching dollars means the total dollar amount of both in hand and in kind matching funds.	
Total project amount is the sum of the total encumbered matching dollars and the amount of requested funds from Section 7.	
Example: \$25,000.00 (Total encumbered matching dollar)/\$100,000.00 (Encumbered and requested funds) = 25% matching dollars	
Entities providing matching funds shall provide documentation that verifies a commitment to provide matching funds and the amount to be provided. There are two types of matching funds: 1) "In Hand", which are funds set aside to accomplish the goals and benchmarks of the project; and 2) "In kind" contributions, that have been received to complete the proposal. In-kind matching funds will be required to have a monetary value for budgeting purposes.	
In kind matching funds are services or goods that are donated to the grantee agency by a third party. <b>Note: One division/department within an agency/organization CANNOT donate goods or services to another division/department with that same agency/organization.</b>	
Examples of "In kind" matching funds or contributions include: 1) Personnel time given to the project (no cash payment for time); 2) Person on loan from another organization/corporation; 3) Use of existing equipment; 4) Use of existing laboratory equipment or facilities; 5) donations from a third party- (excluding cash)	
<b>The matching fund allocation will need to be detailed in the proposed expenditures in Section 10 of this application.</b>	
<b>Failure of the applicant to clearly detail the budget, to include matching funds and expenditures, may result in the application being rejected.</b>	

Scoring Criteria	Points	√	Scoring Criteria	Points	√
10% of the requested funds (10% to 19.99%)	10		60% of the requested funds (60% to 69.99%)	60	
20% of the requested funds (20% to 29.99%)	20		70% of the requested funds (70% to 79.99%)	70	
30% of the requested funds (30% to 39.99%)	30		80% of the requested funds (80% to 89.99%)	80	
40% of the requested funds (40% to 49.99%)	40		90% of the requested funds (90% to 99.99%)	90	
50% of the requested funds (50% to 59.99%)	50				
<b>Applicant Self Score</b>					
[Yellow Box]					

**Section 10 Budget / Proposed Expenditures**

Describe all goods and services to be purchased with the requested funding. As a contracted vendor, these are your deliverables to the Department. Assign a separate item number to each line/deliverable. Enter the statutory purpose of each item, the estimated receive by date of each item, and the associated benchmark number ( See Section 13) Attach copies of bids received and label the bid with the corresponding item number.

Item No.	Description	Statutory Purpose	Bid Attached	Quantity	Cost / Unit	Total Cost	Amount Matching Fund	Amount OERSSIRF Request	Estimated Delivery Date	Benchmark
Example	Handheld Radios	Capital	Yes	10	\$500.00	\$5,000.00	\$2,500.00	\$2,500.00		6
				Totals						

**Applicants submitting an invoice to the Department for reimbursement of deliverables must include documentation the vendor participated in and/or received the deliverable.**



<b>Section 10 Budget / Proposed Expenditures (continued)</b>										
Item No.	Description	Statutory Purpose	Bid Attached	Quantity	Cost / Unit	Total Cost	Amount Matching Fund	Amount OERSSIRF Request	Estimated Delivery Date	Benchmark
Example	Handheld Radios	Capital	Yes	10	\$500.00	\$5,000.00	\$2,500.00	\$2,500.00		6
				Totals						

---

**Applicants submitting an invoice to the Department for reimbursement of deliverables must include documentation the vendor participated in and/or received the deliverable.**

Amendment 2

<b>Section 11 - Previous Funding Assistance</b>			
<i>O.A.C. 310:642- 5 -1 (H) states: If a qualified entity has been approved for one (1) or more OERSSIF proposals from the Department for projects awarded in the past, points shall be deducted from the proposal according to all of the following provisions that apply unless the previous proposal was for an assessment of the need for the establishment of EMS or stabilization of an at-risk EMS:</i>			
If a qualified applicant has been approved for one or more OERSSIRF grants in the past, points shall be deducted; unless the previous proposal(s) was for an assessment of the need to establish an EMS agency or the stabilization of an at-risk EMS. (O.A.C. 310:642-5-1 (H))			
To help ensure accuracy , Department staff and the review panel will score this section together. The Score will be based on the Department document that includes the previous awards, benchmark awards, and at-risk exemptions.			
Criteria	Points Deducted		√
One (1) funded project in the preceding twelve (12) month period, or FY 2022	-80		
More than one (1) OERSSIRF project in the preceding twelve (12) month period, or FY 2021	-100		
One (1) OERSSIRF funded project more than twelve (12) months in the past, or FY 11, 12, 13, 14, 15, 16, 17,18, 19, 20, or 21	-50		
Two (2) OERSSIRF funded projects more than twelve (12) months in the past, or FY 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, or 21	-80		
Three (3) OERSSIRF funded projects more than twelve (12) months in the past, or FY 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, or 21	-100		
Four (4) OERSSIRF funded projects more than twelve (12) months in the past, or FY 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, or 21	-150		
Five (5) or more OERSSIRF funded projects more than twelve (12) months in the past, or FY 11, 12, 13, 14, 15, 16, 17, 18, 19, 20 or 21	-175		
<b>Section 12 - Previous Funding Evaluation</b>			
<i>O.A.C. 310:642- 5 -1 (I) states: The project score established through the Department's evaluation required by OAC 642-9-1(a) for each previously completed OERSSIRF project shall earn the following points:</i>			
The project score established through the OSDH evaluation required by O.A.C. 310:642-9-1 (a) for each previously completed OERSSIRF project shall earn the following points. Applicants shall submit copies of letters verifying the OSDH benchmark ratings.			
Rating	Points / Rating	Number of Benchmark Letters With This Rating	Total Points
Significantly Improved	100		
Improved	50		
Not Improved	-50		
Worsened	-100		
Self Score from Previous Awards			Applicant Self Score
Self Score for Benchmarks			
Total point deduction or additions			

Amendment 2

Section Self Score Summary			
Section	Self Score		
Statutory Purposes			
Multiple Jurisdictions			
Population Density			
Distance to Nearest Trauma Center			
Number of EMTs in Project Area			
Amount of Funding Requested			
Project Matching			
Previous Funding Assistance			
Previous Funding Evaluation			
<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td>Draft Total Score</td> <td></td> </tr> </table>		Draft Total Score	
Draft Total Score			

Amendment 2

<b>Section 13 - Benchmarks</b>
A benchmark is a standard by which a measurement can be made. It is a point of reference for evaluating performance. Benchmarks must be stated in measurable terms.
<p><i>Regulatory Text: (b) Each proposal shall include a section setting forth the criteria that will be used to evaluate the success of the project. The criteria shall include:</i></p> <p><i>(1) Specific, objective metrics for evaluation of the project. For example: a percentage decline in response time or improvement in the number of available EMTs within a region, measured against the same metric at the start of the project.</i></p> <p><i>(2) A clear methodology and a description of data sources for computing the performance measures proposed in the project plan, for example, comparing responder response times or the total number of EMTs in a region against the same metric at the end of the project.</i></p> <p><i>(3) Benchmark measures for each of the following assessment levels:</i></p> <p style="padding-left: 40px;"><i>(A) Significantly improved.</i></p> <p style="padding-left: 80px;"><i>(B) Improved.</i></p> <p style="padding-left: 80px;"><i>(C) Not Improved.</i></p> <p style="padding-left: 80px;"><i>(D) Worsened.</i></p>
Answering the questions below will help establish the benchmark for each statutory purpose detailed in the proposal. Additional pages may be included.
Benchmarks are required for a proposal to be reviewed and scored by the panel.

<b>Statutory Purpose: Funding Assessment Activities</b>
What will be improved through the proposal?
What is the current condition of the item to be improved?
How did you determine the current condition of the item to be improved?
How will the proposal improve the current condition of the item?
When will the current condition of the item be improved?
How will you measure improvement?
To measure Significant Improvement for this item, what is required?
To measure improvement in this item, what is required?
To measure no improvement in this item, what will have occurred?
To measure a worsening condition for this item, what will have occurred?

<b>Statutory Purpose: Stabilization and/or Reorganization of At-Risk Emergency Medical Services</b>
What will be improved through the proposal?
What is the current condition of the item to be improved?
How did you determine the current condition of the item to be improved?
How will the proposal improve the current condition of the item?
When will the current condition of the item be improved?
How will you measure improvement?
To measure Significant Improvement for this item, what is required?
To measure improvement in this item, what is required?
To measure no improvement in this item, what will have occurred?
To measure a worsening condition for this item, what will have occurred?

**Statutory Purpose: Development of Regional Emergency Medical Services**

What will be improved through the proposal?
What is the current condition of the item to be improved?
How did you determine the current condition of the item to be improved?
How will the proposal improve the current condition of the item?
When will the current condition of the item be improved?
How will you measure improvement?
To measure Significant Improvement for this item, what is required?
To measure improvement in this item, what is required?
To measure no improvement in this item, what will have occurred?
To measure a worsening condition for this item, what will have occurred?

**Statutory Purpose: Training for Emergency Medical Director**

What will be improved through the proposal?
What is the current condition of the item to be improved?
How did you determine the current condition of the item to be improved?
How will the proposal improve the current condition of the item?
When will the current condition of the item be improved?
How will you measure improvement?
To measure Significant Improvement for this item, what is required?
To measure improvement in this item, what is required?
To measure no improvement in this item, what will have occurred?
To measure a worsening condition for this item, what will have occurred?

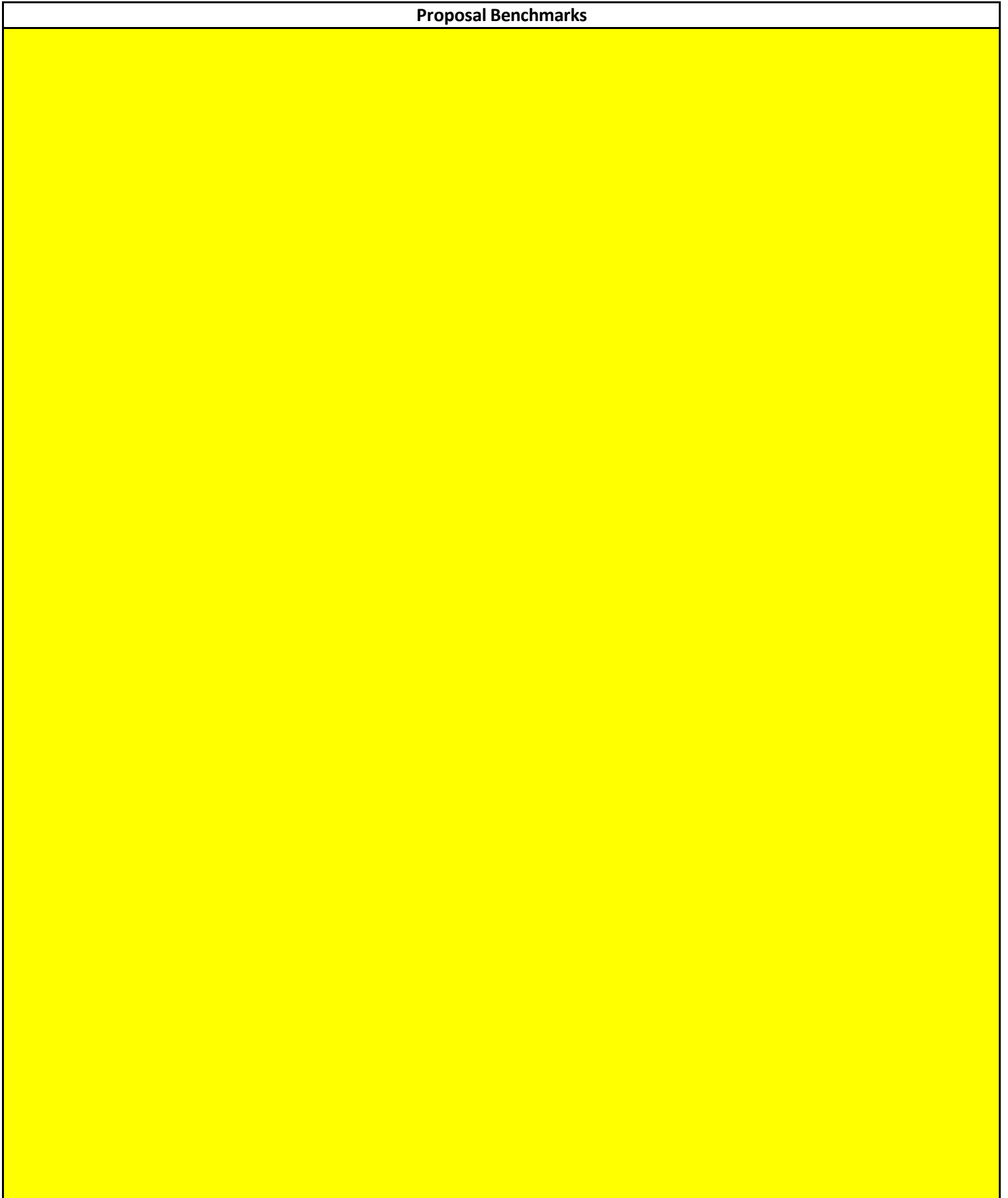
**Statutory Purpose: Access to Training for Front Line Emergency Medical Services Personnel**

What will be improved through the proposal?
What is the current condition of the item to be improved?
How did you determine the current condition of the item to be improved?
How will the proposal improve the current condition of the item?
When will the current condition of the item be improved?
How will you measure improvement?
To measure Significant Improvement for this item, what is required?
To measure improvement in this item, what is required?
To measure no improvement in this item, what will have occurred?
To measure a worsening condition for this item, what will have occurred?

**Statutory Purpose: Capital and Equipment Needs**

What will be improved through the proposal?
What is the current condition of the item to be improved?
How did you determine the current condition of the item to be improved?
How will the proposal improve the current condition of the item?
When will the current condition of the item be improved?
How will you measure improvement?
To measure Significant Improvement for this item, what is required?
To measure improvement in this item, what is required?
To measure no improvement in this item, what will have occurred?
To measure a worsening condition for this item, what will have occurred?

**Proposal Benchmarks**



**Proposal Benchmarks (Continued)**

