
**Appendix G:
Work Group Ranking of
Alternatives Using the
Evaluation Criteria**

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Introduction:

During the March 29, 2004 meeting, work group members were asked to rank the alternatives using the established criteria.

Evaluation Process:

The full group was divided into four stakeholder groups to work through the evaluation of the alternatives. The four stakeholder groups included:

- Federal Way and Kent Leadership,
- Fire and Paramedic Labor,
- Other Fire Departments, and
- EMS Division/King County.

The alternatives were to be compared to the current model (in other words, the current model was not being evaluated). If an alternative was an improvement over the current model, then a +1 or +2 was given for the criteria. If the alternative was worse than the current model, then a -1 or a -2 was given.

The evaluation of the alternatives, using the criteria, follows.

EMS Division/King County

| Evaluation Criteria | Current Enhanced | Single Fire Service Provider | Dual Fire Service Provider |
|--|---|---|--|
| 1. The operating efficiency of the alternative is equal to or higher than those of other alternatives. | +1 Economies of scale | +1 Economies of scale | -1 |
| 2. The financial impacts on partners are clear, equitable and can be sustained by the partners. | 0 | -1.5 Unclear of ultimate impacts | -1.5 |
| 3. The alternative minimizes the risk that lead agency(s) will have to absorb costs in excess of the levy allocation. | 0 | +1 Not sure that lead agency wouldn't have to absorb costs-difference in full and marginal costs | +1 |
| 4. The alternative minimizes the number of ALS providers in King County. | 0 | 0 | -2 Impact on finances, changes to strategic plan, medical direction would be impacted |
| 5. The standards for and delivery of medical treatment and care remain equal to or better than current. | 0 | -1 Decrease slightly due to one step removed medical direction | -2 Even more removed in dual provider model |
| 6. The alternative allows consortium members or partner departments to have a clear structure and/or forum or process to provide input or direction to the lead agency(s). | +1 Improved oversight and involvement | +2 Maximum stakeholder involvement | +1 Improved oversight and involvement |
| 7a. The alternative maintains or improves the stable work environment of all the south King County Medic One employees. | 0 What is definition of stable, similar to what is happening now, change would be unstable | -1 Decrease stability | -1 Decrease stability |
| 7b. The alternative maintains or improves the financial security of all the south King County Medic One employees. | 0 | -1 Slight decrease | -1 Slight decrease |
| 7c. The alternative maintains or improves the retirement of all the south King County Medic One employees. | 0 | +1 Improved retirement | +1 Improved retirement |
| 8. The alternative allows for paramedics' professional growth and career opportunities. | 0 | +5 Increase in professional growth opportunity | +5 Increase in professional growth opportunity |
| 9. The alternative provides for an organizational structure that supports an integrated system of command, control and oversight. | 0 | +1 Short chain of command | +1 Short chain of command |
| 10. The alternative can be achieved in a reasonable time period. | 0 | -2 Negative impact | -2 Negative impact |
| 11. The alternative has the support of sub-regional jurisdictions and medical community. | 0 | -1 Medical only | -2 Medical only |
| 12. The alternative is supported by the Zone 3 fire labor groups and the paramedic labor group. | 0 | -1 Paramedic only | -2 Paramedic only |

Other Fire Departments/ALS providers

| Evaluation Criteria | Current Enhanced | Single Fire Service Provider | Dual Fire Service Provider |
|--|--|---|---|
| 1. The operating efficiency of the alternative is equal to or higher than those of other alternatives. | -1 to +1 | -2 to +2 | -1 to +2 |
| 2. The financial impacts on partners are clear, equitable and can be sustained by the partners. | 0 to +2 Spread throughout county Known impact | -2 to +2 Questions about governance issues, what would be impacts if levy goes away Not clear | -1 to +2 More than one agency absorbs cost. What will governance mean overall Not clear |
| 3. The alternative minimizes the risk that lead agency(s) will have to absorb costs in excess of the levy allocation. | 0 to +2 | 0 to - 2 | 0 to -1 Increase is a negative |
| 4. The alternative minimizes the number of ALS providers in King County. | 0 to +2 | 0 to +2 | -1 to +2 |
| 5. The standards for and delivery of medical treatment and care remain equal to or better than current. | 0 to +2 | 0 to +2 Sees no change | -1 to +2 Elevate fire crews understanding & performance |
| 6. The alternative allows consortium members or partner departments to have a clear structure and/or forum or process to provide input or direction to the lead agency(s). | 0 to +1 | 0 to +1 | 0 to +1 |
| 7a. The alternative maintains or improves the stable work environment of all the south King County Medic One employees. | 0 to +1 | -1 to +2 Negative | -2 to +2 Negative because of transition process |
| 7b. The alternative maintains or improves the financial security of all the south King County Medic One employees. | 0 to +1 | -1 to +2 | -1 to +2 |
| 7c. The alternative maintains or improves the retirement of all the south King County Medic One employees. | 0 | 0 to +2 Positive due to Leoff | -1 to +2 Positive due to Leoff |
| 8. The alternative allows for paramedics' professional growth and career opportunities. | 0 | 0 to +2 Enhanced professional growth | 0 to +2 |
| 9. The alternative provides for an organizational structure that supports an integrated system of command, control and oversight. | 0 to -1 | 0 to +2 | 0 to +2 |
| 10. The alternative can be achieved in a reasonable time period. | 0 to +2 It is a reasonable time period and has support of medical community and some existing providers | -1 to +1 Negative due to overall time frame | -1 to +1 |
| 11. The alternative has the support of sub-regional jurisdictions and medical community. | 0 to +1 | 0 to - 2 | 0 to -2 |
| 12. The alternative is supported by the Zone 3 fire labor groups and the paramedic labor group. | 0 to +1 | 0 to - 2 | 0 to -2 |

Fire and Paramedic Labor Leadership

| Evaluation Criteria | Current Enhanced | Single Fire Service Provider | Dual Fire Service Provider |
|--|---|--|---|
| 1. The operating efficiency of the alternative is equal to or higher than those of other alternatives. | 0 to +1 Improvement | -2 to +2 Improvement | -2 to +1 Perspectives divided by fire service vs. medics |
| 2. The financial impacts on partners are clear, equitable and can be sustained by the partners. | 0 | -2 to 0 Impacts, how would contract work | -2 to 0 Impacts, Two contracts |
| 3. The alternative minimizes the risk that lead agency(s) will have to absorb costs in excess of the levy allocation. | -1 to 0 How will overages be handled | -2 to 0 | -2 to 0 |
| 4. The alternative minimizes the number of ALS providers in King County. | 0 | 0 | -2 to 0 Negative because of dual provider |
| 5. The standards for and delivery of medical treatment and care remain equal to or better than current. | 0 to +1 | -2 to +1 ALS decrease in service vs. enhancement through connection to fire service | -2 to +1 |
| 6. The alternative allows consortium members or partner departments to have a clear structure and/or forum or process to provide input or direction to the lead agency(s). | +1 to +2 | +1 to +2 Different perspectives | +1 to +2 |
| 7a. The alternative maintains or improves the stable work environment of all the south King County Medic One employees. | 0 | -2 to +1 Whether it would be a more stable environment | -2 to +1 |
| 7b. The alternative maintains or improves the financial security of all the south King County Medic One employees. | -1 to 0 | -2 to +1 | -2 to +1 More growth opportunities |
| 7c. The alternative maintains or improves the retirement of all the south King County Medic One employees. | 0 to +1 | -1 to +2 Negative impact on PERS group | -1 to +2 |
| 8. The alternative allows for paramedics' professional growth and career opportunities. | 0 | +1 to +2 | -2 to +2 Extremes |
| 9. The alternative provides for an organizational structure that supports an integrated system of command, control and oversight. | 0 to +1 | 0 to +1 | 0 to +1 |
| 10. The alternative can be achieved in a reasonable time period. | 0 to +2 | -2 to +1 | -2 to +1 |
| 11. The alternative has the support of sub-regional jurisdictions and medical community. | 0 to +2 | -2 to 0 Left up to those people | -2 to 0 |
| 12. The alternative is supported by the Zone 3 fire labor groups and the paramedic labor group. | 0 to +2 Stay with enhanced | -2 to +1 | -2 to 0 |

Kent/Federal Way Leadership

| Evaluation Criteria | Current Enhanced | Single Fire Service Provider | Dual Fire Service Provider |
|--|--|---|--|
| 1. The operating efficiency of the alternative is equal to or higher than those of other alternatives. | -2 to 0 Negative impact-need for more medic staffing and overtime is high Not a step forward | + 1 to +2 Higher risk re: efficiencies | +2 More solid system for the long term, solid political ground |
| 2. The financial impacts on partners are clear, equitable and can be sustained by the partners. | -1 Question about CX funding in the future, sub-regional CX fund | 0 to -1 | +1 to +2 |
| 3. The alternative minimizes the risk that lead agency(s) will have to absorb costs in excess of the levy allocation. | 0 to -1 | 0 to -1 | +1 to +2 |
| 4. The alternative minimizes the number of ALS providers in King County. | 0 | 0 | -1 |
| 5. The standards for and delivery of medical treatment and care remain equal to or better than current. | -1 to +1 | 0 to +2 | +1 to +2 Addition of another street MSO |
| 6. The alternative allows consortium members or partner departments to have a clear structure and/or forum or process to provide input or direction to the lead agency(s). | -1 to +1 | 0 to +2 | +2 Depts have a clear forum – advisory board at local level more effective, more policy level decision-making. Could be advisory or governance. |
| 7a. The alternative maintains or improves the stable work environment of all the south King County Medic One employees. | -2 to 0 | 0 to +2 | +2 |
| 7b. The alternative maintains or improves the financial security of all the south King County Medic One employees. | -2 to 0 | 0 to +2 | +1 to +2 |
| 7c. The alternative maintains or improves the retirement of all the south King County Medic One employees. | 0 | +2 | +2 |
| 8. The alternative allows for paramedics' professional growth and career opportunities. | -2 to 0 | +1 to +2 | +2 |
| 9. The alternative provides for an organizational structure that supports an integrated system of command, control and oversight. | 0 | 0 to +2 | +2 |
| 10. The alternative can be achieved in a reasonable time period. | 0 to +2 | -1 to +2 | 0 to +2 |
| 11. The alternative has the support of sub-regional jurisdictions and medical community. | -2 to 0 | 0 to +1 Better buy-in from electeds. | 0 to +2 Better buy-in from electeds |
| 12. The alternative is supported by the Zone 3 fire labor groups and the paramedic labor group. | 0 to +2 | 0 | -2 to 0 |

Full Group Discussion:

After hearing the stakeholder group reports, the full group identified where they had a common assessment:

FULL GROUP

| Evaluation Criteria | Current Enhanced | Single Fire Service Provider | Dual Fire Service Provider |
|--|-------------------|---|----------------------------|
| 1. The operating efficiency of the alternative is equal to or higher than those of other alternatives. | | | |
| 2. The financial impacts on partners are clear, equitable and can be sustained by the partners. | | | |
| 3. The alternative minimizes the risk that lead agency(s) will have to absorb costs in excess of the levy allocation. | | | |
| 4. The alternative minimizes the number of ALS providers in King County. | No change | | minus |
| 5. The standards for and delivery of medical treatment and care remain equal to or better than current. | | | |
| 6. The alternative allows consortium members or partner departments to have a clear structure and/or forum or process to provide input or direction to the lead agency(s). | | Improvement Zone 3 - action | |
| 7a. The alternative maintains or improves the stable work environment of all the south King County Medic One employees. | | | |
| 7b. The alternative maintains or improves the financial security of all the south King County Medic One employees. | | | |
| 7c. The alternative maintains or improves the retirement of all the south King County Medic One employees. | | Short term adverse impacts Long term gains (10 years plus) | |
| 8. The alternative allows for paramedics' professional growth and career opportunities. | | Improvement/more possibilities | |
| 9. The alternative provides for an organizational structure that supports an integrated system of command, control and oversight. | | Improvement over current | |
| 10. The alternative can be achieved in a reasonable time period. | | | |
| 11. The alternative has the support of sub-regional jurisdictions and medical community. | | | |
| 12. The alternative is supported by the Zone 3 fire labor groups and the paramedic labor group. | Favored by Medics | | |