

Legislation Text

File #: 20-0527, Version: 2

Consider and take action on a resolution authorizing an expenditure of an amount not to exceed \$220,000 for the purchase and maintenance of four (4) Stryker Medical Power Load Stretcher Systems for the EMS Department (Fire Chief)

Approval of this resolution will authorize the purchase of four (4) Stryker PowerLoad systems for the remaining four (4) ambulances and two (2) stretcher XPS retrofit kits for the two (2) ambulances that already have the PowerLoad systems installed to allow for the stretchers to be used interchangeably in all six (6) units. The authorization of purchase will also provide for the install of the systems into the units to be done onsite within a two-day period by an approved installer and the first year of onsite preventive maintenance.

Stretcher lifting incidents are a major cause of lost-time injuries for EMS. Specifically, League City EMS has experienced thirteen (13) stretcher lifting injuries for a total of \$326,512.27 in medical expenses, plus overtime required to cover lost time over the last four (4) years. Power lifting and loading systems in ambulance patient compartments ensure that patients are securely lifted and loaded in a safe and comfortable manner without causing lost-time injuries to the medics or unintended harm to the patient.

There is a 4-6 week lead time for the stretchers to arrive. Stryker Medical does not install the systems and has approved either the ambulance manufacturer or third-party company, Emsar. Emsar has the ability to perform the install onsite over two (2) days decreasing unit out of service times.

CONTRACT ORIGINATION: Fire Department

Attachments:

- 1. Data Sheet
- 2. Proposed Resolution
- 3. Stryker Medical Powerload Stretcher System Quote
- 4. Stryker Medical Powerload Stretcher System Information
- 5. Stryker Medical Powerload Stretcher System and Stretcher Sole Source
- 6. Approved Installer Letter from Stryker
- 7. Emsar Third-party Install Quote
- 8. Frazerbilt Ambulance Manufacturer Install Quote

FUNDING

{X} Funds are available from Account # 2950000 - 55730 EMS Equipment - Capital Outlay

- { } Requires Budget Amendment to transfer from Account # to Account #
- { } NOT APPLICABLE

STRATEGIC PLANNING

- { } Addresses Strategic Planning Critical Success Factor # _____ and Initiative # _____
- {X} NOT APPLICABLE