

THE INFORMATION IN THIS BOX IS NOT A PART OF THE CONTRACT AND IS FOR COUNTY USE ONLY



Contract Number

23-519

SAP Number

## Arrowhead Regional Medical Center

Department Contract Representative	William L. Gilbert
Telephone Number	(909)-580-6150
Contractor	The Regents of the University of California, University of California, Riverside
Contractor Representative	KA Aguilar
Telephone Number	(951) 827-7598
Contract Term	June 13, 2023 through June 30, 2027
Original Contract Amount	NTE \$30,000 Annually
Amendment Amount	
Total Contract Amount	NTE \$30,000 Annually
Cost Center	

**Briefly describe the general nature of the contract:** Agreement with The Regents of the University of California, University of California, Riverside for use of its Center for Simulated Patient Care to receive advanced simulation training for an annual not-to-exceed amount of \$30,000 for the term of June 13, 2023 through June 30, 2027.

### FOR COUNTY USE ONLY

Approved as to Legal Form

Charles Phan, Deputy County Counsel

Date 5/25/2023

Reviewed for Contract Compliance

Date

Reviewed/Approved by Department

William L. Gilbert, Director

Date

6/7/23

**CSPC SERVICE  
AGREEMENT BETWEEN  
SAN BERNARDINO COUNTY ON BEHALF OF ARROWHEAD REGIONAL MEDICAL  
CENTER  
AND  
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA,  
UNIVERSITY OF CALIFORNIA, RIVERSIDE, UCR HEALTH**

This Agreement is by and between The Regents of the University of California, the University of California, Riverside, UCR Health (hereinafter "UNIVERSITY") and San Bernardino County on behalf of Arrowhead Regional Medical Center (hereinafter "AFFILIATE").

WHEREAS, UNIVERSITY owns and operates a simulation laboratory, known as the Center for Simulated Patient Care (CSPC), designed to educate and train students, residents, and practitioners on various medical procedures as described in Exhibit A, which is attached hereto and incorporated herein ("SERVICES"); and

WHEREAS, AFFILIATE sponsors several residency programs, with residents in need of SERVICES; and

WHEREAS, UNIVERSITY wants to provide SERVICES to AFFILIATE as requested;  
THEREFORE, UNIVERSITY and AFFILIATE agree as follows:

**I. SCOPE OF WORK**

UNIVERSITY shall provide SERVICES as requested by AFFILIATE using a CSPC Service Request (also referred herein as "Service Request"), at agreed upon dates and times. To be effective and bind both parties, a CSPC Service Request must be signed by AFFILIATE, and accepted by UNIVERSITY with a signature of an authorized representative of UNIVERSITY. The Hospital Director of the AFFILIATE is authorized to sign the Service Requests on behalf of the AFFILIATE.

**II. TERM AND TERMINATION**

- A. This agreement shall commence on the date fully executed and terminate on June 30, 2027, unless earlier terminated.
- B. Either party may terminate this Agreement for any reason on 30 days written notice, as set forth herein. If this Agreement is terminated prior to the expiration date of this Agreement, each party is required to perform their obligations as set forth in a Service Request that has been accepted by UNIVERSITY prior to the Notice of termination and in such event, the Agreement shall terminate after all aspects of the Service Request is completed.

**III. COMPENSATION AND REIMBURSEMENT OF EXPENSES**

- A. Exhibit A contains the price list for SERVICES to be provided by UNIVERSITY through CSPC. Such rates shall be subject to a five percent (5%) increase each fiscal

year. AFFILIATE shall compensate UNIVERSITY for the cost of such SERVICES listed in Exhibit A. In addition, AFFILIATE shall pay all amounts for additional goods, or services including catering if requested by AFFILIATE, that are included on an accepted CSPC Service Request.

- B. Payments shall be made to the UNIVERSITY upon the completion of SERVICES, with the total amount of a CSPC Service Request due and payable 30 days after the date of invoice is issued for such Service Request.
- C. Payment checks shall reference this Agreement and be issued to the Regents of the University of California and mailed to:

900 University Ave - Main Cashiers (SOM)  
Student Services Bldg. Rm 1111  
Riverside, CA 92521  
ATTN: Maria Garza

#### IV. TERMS AND CONDITIONS

##### A. Indemnification

AFFILIATE agrees to indemnify, defend (with counsel reasonably approved by UNIVERSITY) and hold harmless UNIVERSITY and its regents, officers, employees, agents, and volunteers from any and all claims, actions or losses, damages, and/or liability resulting from AFFILIATE's negligent acts or omissions which arise from AFFILIATE's performance of its obligations under this Agreement, but only in proportion to and to the extent such liability, loss, expense (including reasonably attorneys' fees), or claims for injury or damage are caused by or result from the negligent or intentional acts or omission of AFFILIATE, its regents, officers, employees, or agents.

UNIVERSITY agrees to indemnify, defend (with counsel reasonably approved by AFFILIATE), and hold harmless AFFILIATE and its officers, employees, agents, and volunteers from any and all claims, actions or losses, damages, and/or liability resulting from UNIVERSITY's negligent acts or omissions which arise from UNIVERSITY's performance of its obligations under this Agreement, but only in proportion to and to the extent such liability, loss, expense (including reasonably attorneys' fees), or claims for injury or damage are caused by or result from the negligent or intentional acts or omission of UNIVERSITY, its officers, employees, or agents.

Neither termination of this Agreement nor completion of the acts to be performed under this Agreement shall release any party from its obligation to indemnify as to any claims or cause of action asserted so long as the event(s) upon which such claim or cause of action is predicated shall have occurred prior to the effective date of termination or completion.

##### B. Insurance

UNIVERSITY and AFFILIATE are authorized self-insured public entities for purposes of Professional Liability, General Liability, Automobile Liability and



Workers' Compensation and warrant that through their respective programs of self-insurance, they have adequate coverage or resources to protect against liabilities arising out of the performance of the terms, conditions or obligations of this Agreement. The parties waive the per capita risk allocation set forth in Government Code section 895.6. Instead, they agree if one of them is held liable upon any judgment for damages caused by a negligent or wrongful act or omission occurring in the performance of this Agreement, the parties' respective pro-rata shares in satisfaction of the judgment will be determined by applying principles of comparative fault.

C. WARRANTY

**THE PRODUCTS AND SERVICES UNDER THIS AGREEMENT ARE PROVIDED WITHOUT WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE OR ANY OTHER WARRANTY, EXPRESSED OR IMPLIED. IN NO EVENT IS THE REGENTS OF THE UNIVERSITY OF CALIFORNIA LIABLE FOR ANY INCIDENTAL, SPECIAL, OR CONSEQUENTIAL DAMAGES RESULTING FROM THE USE OF THE PRODUCTS AND SERVICES CONTRACTED FOR HEREIN.**

D. Cooperation

UNIVERSITY and AFFILIATE shall cooperate in the event of any legal action or claim made by a third party that may result from activities relating to the performance of this Agreement.

E. Compliance

UNIVERSITY and AFFILIATE agree to comply with all applicable federal, state, and local laws, regulations and codes in the performance of this Agreement.

F. Force Majeure

Neither party shall be responsible for damages or for delays or failures in performance resulting from acts or occurrences beyond its reasonable control, including, without limitation: fire, lightning, explosion, power surge or failure, water, acts of God, war, revolution, civil commotion or acts of civil or military authorities or public enemies: any law, order, regulation, ordinance, or requirement of any government or legal body or any representative of any such government or legal body; or labor unrest, including without limitation, strikes, slowdowns, picketing or boycotts; inability to secure materials and supplies, transportation facilities, fuel or energy shortages, or acts or omissions of others.

G. Assignment

The obligations of the parties pursuant to this Agreement shall not be assigned without the prior written consent of the other party.

H. Confidentiality

1. Each person participating in SERVICES shall complete and sign the Release or Opt Out Form.
2. It is agreed that AFFILIATE shall not take any pictures or videos, or disclose information obtained during AFFILIATE's presence on the PREMISES, or while SERVICES are being provided, to any third party without the prior written

authorization from UNIVERSITY, except where disclosure is required by law. This provision shall survive termination of this Agreement.

3. CSPC is equipped with video and audio recording devices in each room. Recordings are used solely for educational purposes within the SERVICES being provided unless UNIVERSITY has a signed Consent Form to participate in research or has executed the release in the RELEASE FORM.
  - a. If there is a signed Consent Form, the recordings will be archived and accessed by the Institutional Review Board approved research team per protocol guidelines. These recordings shall be retained for a period of three (3) years following the conclusion of the research.
  - b. If there is a signed RELEASE FORM with the release being selected, the recordings will be archived under the scenario name and date. Names and other identifiers will not be stored. Only CSPC personnel with granted permissions will have access to these recordings, for the purposes permitted in the Release Form. These recordings shall be retained for a period of four (4) years.
  - c. A participant that does not sign a Consent Form or RELEASE FORM may ask to witness CSPC's staff deleting the digital files containing the participant.
  - d. Handwritten/Typed/Photocopied Curriculum Materials (scenarios, cases, checklists, etc.) for standardized patient encounters and/or advanced patient simulations shall be retained as long as administratively useful. Rosters will be retained for a period of one (1) year.
  - e. Any documentation used for the purpose of CSPC operations and administrative tasks shall be retained as long as administratively useful. This may include potentially identifiable information such as instructor lists and contact information, and departmental recharge codes.
  - f. All data is stored behind UNIVERSITY firewall technology. Digital video recordings are stored behind UNIVERSITY firewall technology and proprietary firewall technology from EMS.

## V. MISCELLANEOUS

### A. Notice

Whenever any notice is to be given hereunder, it shall be in writing and shall be deemed received, if delivered by courier on a business day, on the day delivered, or on the second business day following mailing, if sent by first-class certified or registered mail, postage prepaid, to the following addresses:

To UNIVERSITY:

University of California, Riverside SOM  
900 University Avenue  
Riverside, CA 92521  
Attn: Dean SOM

AND

University of California, Riverside SOM  
14350-2 Meridian Parkway  
Riverside, CA 92508  
Attn: Director of Contracting



To AFFILIATE:

Arrowhead Regional Medical Center  
400 North Pepper Ave.  
Colton, CA 92324  
Attn: Hospital Director

**B. Severability**

If any term, condition, or provision of this Agreement is held by a court of competent jurisdiction to be invalid, void, or unenforceable, the remaining provisions will nevertheless continue in full force and effect, and shall not be affected, impaired, or invalidated in any way.

**C. Use of Name**

The parties agree that they will not use the name, logo, seal or trademarks of the other party or its employees, including without limitation, in any advertisement, press release, publicity or any product or service resulting from this Agreement, without prior written approval of the other party.

**D. Non-Waiver**

Waiver or non-enforcement by either party of a term or condition shall not constitute a waiver or a non-enforcement of any other term or condition or of any subsequent breach of the same or similar term or condition.

**E. No Third-Party Rights**

Nothing in this Agreement is intended to make any person or entity who is not signatory to the agreement a third-party beneficiary of any right created by this Agreement or by operation of law.

**F. Attorney's Fees**

In any action brought by a party to enforce the terms of this Agreement, each party shall bear their own attorney's fees and costs regardless of who is the prevailing party. However, this shall not apply to attorney's fees that are recoverable as an indemnification obligation.

**G. Intentionally Omitted**

**H. Entire Agreement**

This Agreement and any exhibits attached hereto constitute the entire agreement between the parties to it and supersede any prior understanding or agreement with respect to the services contemplated and may be amended only by written amendment executed by both parties to this Agreement. This Agreement may be executed in any number of counterparts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Agreement. The parties shall be entitled to sign and transmit an electronic signature of this Agreement (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature

agrees to promptly execute and deliver to the other party an original signed Agreement upon request.

I. Governing Law and Venue.

This Agreement shall be construed in accordance with the laws of the State of California without regard to its conflicts of laws rules. Any action arising hereunder shall be venued exclusively in the Superior courts in the State of California.

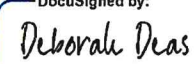
J. Independent Contractor

The Parties in the performance of this Agreement shall be and act as independent contractors. In no event shall this Agreement be construed as establishing a partnership or joint venture or similar relationship between the parties hereto. Each party shall be liable for their own debts, obligations, acts and omissions, including the payment of all required withholding, social security and other taxes or benefits to its employees or staff.

K. No Requirement to Refer

The Parties acknowledge that nothing contained herein shall be interpreted to require or obligate UNIVERSITY to admit or cause the admittance of a patient to AFFILIATE, or to utilize its services. The Parties further acknowledge that none of the benefits granted the Parties under this Agreement are conditioned on any requirement or expected that the Parties make referrals to be in a position to make or influence referrals to, or otherwise generate business for the other Party. The Parties further acknowledge that neither Party is restricted from referring any service to, or otherwise generating any business for any other entity of their choosing.

The Regents of the University of California, The University of California, Riverside, UCR Health

DocuSigned by:  
  
870C12B416E84CB...  
Deborah Deas, M.D., M.P.H.  
Vice Chancellor, Health Sciences  
Dean, School of Medicine

1/4/2023 | 8:44 AM PST

Date

San Bernardino County on behalf of Arrowhead Regional Medical Center

By

  
Dawn Rowe

Date

JUN 13 2023

Name

Chair, Board of Supervisors

Title

SIGNED AND CERTIFIED THAT A COPY OF  
THIS DOCUMENT HAS BEEN DELIVERED  
TO THE CHAIRMAN OF THE BOARD  
LYNNA MONELL  
Clerk of the Board of Supervisors  
of the County of San Bernardino

By

  
Deputy



## EXHIBIT A

## Center for Simulated Patient Care (CSPC) Rates



Item#	Rate Description	Quantity	FY23 Internal (Sponsored) Rates	FY23 External Rates	Other Details
<b>American Heart Association Courses (in Cooperation with our Training Center Partner, CalFire/Riverside County Fire Department)</b>					
<b>Heartcode BLS</b>					
CSPS-01	UCR Affiliated	Per user	\$ 83.00		Does Not Include Provider Manuals
CSPS-02	Non-UCR Affiliated	Per user	\$ 108.00	\$ 136.00	Does Not Include Provider Manuals
<b>Heartcode ACLS</b>					
CSPS-03	UCR Affiliated	Per user	\$ 207.00		Does Not Include Provider Manuals
CSPS-04	Non-UCR Affiliated	Per user	\$ 248.00	\$ 312.00	Does Not Include Provider Manuals
<b>Heartcode PALS</b>					
CSPS-05	UCR Affiliated	Per user	\$ 207.00		Does Not Include Provider Manuals
CSPS-06	Non-UCR Affiliated	Per user	\$ 248.00	\$ 312.00	Does Not Include Provider Manuals
<b>Skills Verification of Online Completion</b>					
CSPS-07	UCR Affiliated	Per user	\$ 33.00		
CSPS-08	Non-UCR Affiliated	Per user	\$ 50.00	\$ 63.00	
<b>Scenario Development</b>					
CSPS-09	Pre-Existing Scenario Adaptation/Use	per scenario	\$ 331.00	\$ 417.00	
CSPS-10	Curriculum Simulation Development/Integration	per scenario	\$ 497.00	\$ 626.00	Includes Scenario Development
CSPS-11	Scenario Development/Testing	per scenario	\$ 662.00	\$ 834.00	Does Not Include Curriculum Development
<b>Scenario Operations</b>					
CSPS-12	Full-day Simulation (up to 12 participants)	per 8 hr. session, per room	\$ 4,637.00	\$ 5,843.00	Standard Equipment*, and 1 Simulation Technician
CSPS-13	Half-day Simulation (Up to 12 participants)	per 4 hr. session, per room	\$ 2,484.00	\$ 3,130.00	Standard Equipment*, and 1 Simulation Technician
<i>*SIM Suite standard equipment includes: Patient Monitor and LED/Apple TV. DOES NOT INCLUDE: Code Cart and medications, scenario recording, IT support, and a debriefing room. Able to be reserved for less than 4 hours at a pre-rated amount for Affiliated/Non-affiliate d.</i>					
<b>Scenario IT Support</b>					
CSPS-14	IT Support Personnel	per hr.	\$ 41.00	\$ 52.00	1 IT Support Person
CSPS-15	Simulation Recording Service (EMS/B-Line). Previously EMS IQ Recording Services	per hour	\$ 41.00	\$ 52.00	Includes Temporary Storage of Scenario for Debriefing
CSPS-16	Conference Room for Instruction or Debriefing	per hr., per room	\$ 33.00	\$ 42.00	
<b>Consultation</b>					
CSPS-17	Consultation with Medical Director	per hr.	\$ 662.00	\$ 834.00	
CSPS-18	Consultation with Director of Operations and/or Simulation Specialists	per hr.	\$ 331.00	\$ 417.00	
<b>Scenario Support</b>					
CSPS-19	Code Cart/Training Medications	per tray, per room	\$ 331.00	\$ 417.00	Per Scenario Encounter
CSPS-20	Certified Healthcare Simulation Educator (Debriefing)	per hr.	\$ 157.00	\$ 198.00	Minimum 4 Hours
CSPS-21	Resident Skills/Scenario Instructor	per hr.	\$ 154 - \$568	\$ 194 - \$716	Rate Varies on Instructor Credentials/Skill
<b>Code Team Training</b>					
CSPS-22	Participant Session Fee	per 4 hr. session, per room	\$ 3,312.00	\$ 4,173.00	Maximum of 8 Participants per 4 Hour Session (Inc. Task Trainers, Medications and Other Disposables), Also Includes 1 Simulation Technician and 1 CHSE.
<b>Rapid Response Team Training</b>					
CSPS-23	Participant Session Fee	per 4 hr. session, per room	\$ 3,312.00	\$ 4,173.00	Maximum of 8 Participants per 4 Hour Session (Inc. Task Trainers, Medications and Other Disposables), Also Includes 1 Simulation Technician and 1 CHSE.
<b>Boot Camps</b>					
CSPS-24	SOM Student Session Fee	per 4 hr. session, per room	\$ 2,567.00	\$ 3,234.00	24 Students, 4 Instructors, Reusable Task Trainers, and Other Disposables
CSPS-25	SOM Resident Session Fee	per 4 hr. session, per room	\$ 3,064.00	\$ 3,861.00	12 Students, 2 Instructors, 2 Sim Techs, Task Trainers, and Other Disposables
<b>Procedure Trainers</b>					
CSPS-27	IV Arm (May be used for blood draw instruction) (Per Hour)	per model, per hr.	\$ 17.00	\$ 21.00	Laerdal
CSPS-28	Adult Intermittent Infusion Arm or Leg (Per Hour)	per model, per hr.	\$ 33.00	\$ 42.00	Simulabs
CSPS-29	> IV/IO Consumables (EZ IO)	per model, per hr.	\$ 50.00	\$ 63.00	Various
CSPS-30	CVA Ultrasound Training Model (Per Hour)	per model, per hr.	\$ 166.00	\$ 209.00	Blue Phantom
CSPS-31	CVA Ultrasound Training Model (Per Hour)	per model, per hr.	\$ 132.00	\$ 166.00	Kyoto Kagaku
CSPS-31A	CVA (Femoral) Ultrasound Training Model (Per Hour)	per model, per hr.	\$ 132.00	\$ 166.00	Simulab
CSPS-32	> CVA Catheter Set	per model, per hr.	\$ 215.00	\$ 271.00	Cook
CSPS-33	Paracetesis Ultrasound Training Model (Per Hour)	per model, per hr.	\$ 248.00	\$ 312.00	Blue Phantom
CSPS-33A	US FAST Dynamic Trainer	per model, per hr.	\$ 300.00	\$ 378.00	Blue Phantom
CSPS-34	Thoracentesis Ultrasound Training Model (Per Hour)	per model, per hr.	\$ 199.00	\$ 251.00	Blue Phantom
CSPS-35	Paracentesis/Thoracentesis Trainer (Per Hour)	per model, per hr.	\$ 33.00	\$ 42.00	Sawbones
CSPS-36	>Safe-T-Centesis Kit	per model, per hr.	\$ 248.00	\$ 312.00	CareFusion





Center for Simulated Patient Care (CSPC) Rates

CSPS-37	LP/CSF Ultrasound Training Model (Per Hour)	per model, per hr.	\$	166.00	\$	209.00	Kyoto Kagaku
CSPS-38	>Lumbar Puncture Tray (20G)	per model, per hr.	\$	66.00	\$	83.00	CardinalHealth
CSPS-39	Airway Trainer (Per Hour) (Adult, Pediatric, Infant)	per model, per hr.	\$	83.00	\$	105.00	Laerdal, Trucorp
CSPS-40	Difficult Airway Management Trainer (Per Hour)	per model, per hr.	\$	116.00	\$	146.00	Gaumard
CSPS-41	>ET Consumables (ET assemblies and standard direct-view laryngoscope)	per model, per hr.	\$	66.00	\$	83.00	Various
CSPS-42	>Video laryngoscope (Per Hour)	per model, per hr.	\$	83.00	\$	105.00	Storz
CSPS-42A	>Video laryngoscope (Per Hour)	per model, per hr.	\$	83.00	\$	105.00	Glidescope
CSPS-42B	Cricothyrotomy Trainer (Pre Learner)	per model, per hr.	\$	17.00	\$	21.00	Nasco
CSPS-43	Ultrasound Knee Module for Aspiration & Injection (Per Hour)	per model, per hr.	\$	166.00	\$	209.00	Limbs & Things
CSPS-44	Suturing Basic, Includes block and materials	per model, per hr.	\$	207.00	\$	261.00	Syndaver
CSPS-45	Eye Examination Simulator (Per Hour)	per model, per hr.	\$	33.00	\$	42.00	Kyoto Kagaku
CSPS-46	Ultrasoundable 2 Vessel Vascular Access Trainer (Per Hour)	per model, per hr.	\$	33.00	\$	42.00	Blue Phantom
Scenario Support Adjuncts							
CSPS-47	Trauma Advanced Adult Human Patient Simulator (Per Hour)	per mannequin, per hr.	\$	662.00	\$	834.00	Gaumard
CSPS-48	Human Adult Patient Simulator (Per Hour)	per mannequin, per hr.	\$	497.00	\$	626.00	Gaumard
CSPS-48P	Human Pediatric Patient Simulator (Per Hour)	per mannequin, per hr.	\$	495.00	\$	624.00	Gaumard
CSPS-48I	Human Infant Patient Simulator (Per Hour)	per mannequin, per hr.	\$	495.00	\$	624.00	Gaumard
CSPS-49	Birth Simulator (Per Hour)	per mannequin, per hr.	\$	662.00	\$	834.00	Gaumard
CSPS-50	Birth Simulator (Requires Standardized Patient)	per mannequin, per hr.	\$	166.00	\$	209.00	Laerdal
CSPS-51	>Emergency Childbirth Kit	per unit/kit	\$	17.00	\$	21.00	Dynarex
Task Trainers							
CSPS-52	SAM II Cardiac Pulmonary Auscultation Trainer (Per Hour)	per unit, per hr.	\$	83.00	\$	105.00	Cardionics
CSPS-53	SimScope (Programmable Stethoscope) (Per Hour)	per unit, per hr.	\$	33.00	\$	42.00	Cardionics
CSPS-54	SonoSim® Edition Ultrasound Trainer (Per Hour)	per unit, per hr.	\$	83.00	\$	105.00	SonoSim
CSPS-55	Breast Models	per unit, per hr.	\$	17.00	\$	21.00	Universal Medical
CSPS-56	Female Pelvic Models (With Multiple cervical Inserts)	per unit, per hr.	\$	166.00	\$	209.00	Limbs & Things
CSPS-57	Female Pelvic Models-Ultrasoundable	per unit, per hr.	\$	166.00	\$	209.00	Blue Phantom
CSPS-58	Male Pelvic Model (With multiple prostate Inserts)	per unit, per hr.	\$	33.00	\$	42.00	Nasco
CSPS-59	Testes Models	per unit, per hr.	\$	17.00	\$	21.00	3B Scientific
Equipment							
CSPS-60	Ultrasound Device - Handheld (Per Hour)	per unit, per hr.	\$	83.00	\$	105.00	GE
CSPS-61	Ultrasound Device (Per Hour)	per unit, per hr.	\$	166.00	\$	209.00	GE
CSPS-62	Ultrasound Device - Handheld (Per Hour/per machine)	per unit, per hr.	\$	50.00	\$	63.00	Butterfly iQ and a linked mini iPad
CSPS-63	Dental Emergency Kit (Per Learner)	per unit/kit	\$	15.00	\$	19.00	HealthFirst

Standardized Patients (SP) and Clinical Assessment

Item#	Rate Description	Quantity	FY22 Internal (Sponsored) Rates		FY22 External Rates		Other Details
OSCE Education/Curricular Support							
SP-01	Script/Cases/Evaluation Forms/Adaptation of Existing Cases/No Change Except Dates and Facility Names	per case	\$	83.00	\$	105.00	Per Case
SP-02	Developing Script/Cases/Evaluations	per hr./per case	\$	58.00	\$	73.00	Per Hour Per Case
	Consultation with Medical Director	per hr.	\$	662.00	\$	834.00	Please see CSPC-17
	Consultation with Director of Operations and/or Simulation Specialists	per hr.	\$	331.00	\$	417.00	Please see CSPC-18
OSCE Standardized Patient (SP) Department							
SP-05	Training/ General	per SP/per hr.	\$	33.00	\$	42.00	Min. 2 Hours
SP-06	Human Simulation – Verbal Feedback/Evaluation optional	per SP/per hr.	\$	50.00	\$	63.00	Min. 2 Hours
SP-07	SP Pelvic	per SP/per exam	\$	112.50	\$	142.00	
OSCE IT Support							
SP-08	IT Support Personnel	per hr.	\$	83.00	\$	105.00	Includes 2 Support Personnel
SP-09	Simulation Recording Service (SimCapture)	per hr.	\$	41.00	\$	52.00	Per OSCE (Includes Temporary Storage of Encounter Data)
SP-10	Computer/Laptop use	per computer/laptop	\$	41.00	\$	52.00	Per Computer/Laptop
OSCE Faculty Support							
SP-11	Clinical Faculty Support for Grading/Evaluation	per faculty/ per 4hr session	\$	596.00	\$	751.00	Minimum 4 Hour Session

General Charges and Fees for the Center for Simulated Patient Care

Applies to Both Simulation and SP Utilization



Center for Simulated Patient Care (CSPC) Rates

Item#	Rate Description	Quantity	FY22 Internal (Sponsored) Rates		FY22 External Rates		Other Details
Miscellaneous Fees							
GP-01	Parking <sup>1</sup>		\$	15.00	\$	19.00	
GP-02	Room rental (Room #102/104, 106/108 )	Per Hour	\$	33.00	\$	42.00	
GP-03	Standardized Patient (Per Hour, 2 Minimum)		\$	23.00	\$	29.00	Includes Ultrasound Models, Non-Healthcare Sim Confederates, Non-Trained Standardized Patients
GP-04	Catering		\$	-	\$	-	Please Contact the SP Office for Pricing and Availability.
GP-05	Support Staff for Event	Per Hour	\$	43.00	\$	54.00	Fees includes 1 hr of preparation & 1 hr of post event wrap-up.
GP-06	Off Campus Simulation Sessions		\$	-	\$	-	Please Contact the SP Office for Pricing and Availability.
GP-07	Use of Space/Filming		\$	-	\$	-	Please Contact the SP Office for Pricing and Availability.

<sup>1</sup> Parking cost based on red lot rate for FY22 for internal customers.  
Services highlighted in yellow represent services will be discontinued in FY22