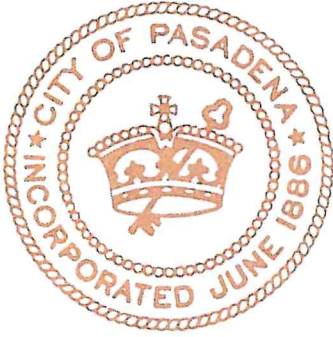




Agenda Report

August 17, 2026

TO: Honorable Mayor and City Council

FROM: Fire Department

SUBJECT: AUTHORIZE THE CITY MANAGER TO ENTER INTO A CONTRACT WITH HOUCHIN COMMUNITY BLOOD BANK FOR BLOOD AND BLOOD COMPONENTS FOR A TERM OF 12 MONTHS, WITH THE OPTION TO EXTEND UP TO 36 MONTHS, FOR AN AMOUNT NOT TO EXCEED \$300,000

RECOMMENDATION:

It is recommended that the City Council:

1. Find that the proposed action is not a "project" subject to the California Environmental Quality Act ("CEQA") pursuant to Public Resources Code §21065 and within the meaning of State CEQA Guidelines §15378;
2. Authorize the City Manager to enter into a 12-month term contract, with the option to extend, up to 36 months with Houchin Community Blood Bank, without competitive bidding pursuant to City Charter Section 1002(F) contracts for professional or unique services, to provide blood and blood components, for an amount not to exceed \$300,000;
3. Grant the recommended contract an exemption from the Competitive Selection process pursuant to Pasadena Municipal Code Section 4.08.049(B) contracts for which the City's best interests are served; and
4. Authorize the City Manager to approve no-cost amendments to the subject contract including durational extensions.

BACKGROUND:

The Pasadena Fire Department (PFD) in partnership with Huntington Medical Hospital (HMH), is working to enhance pre-hospital emergency care and improve outcomes for community members experiencing life-threatening injuries and illnesses through the development of a pre-hospital whole blood administrative program. Traumatic hemorrhage remains one of the leading causes of preventable death, and national data indicates that the early administration of whole blood in the field can significantly

increase survivability for patients with severe bleeding. For every minute that an uncontrolled hemorrhage continues, there is a 2% increase in mortality. In support of efforts to improve pre-hospital medical care and reduce preventable deaths, PFD has determined that implementing a pre-hospital whole blood administration program is an essential next step.

The PFD conducted a supplier review which focused on organizations already supporting established pre-hospital whole blood programs, including Los Angeles County and Compton Fire Department. San Diego Blood Bank was evaluated but ruled out due to high costs and operational demands that were not feasible for HMH. PFD also contacted the American Red Cross, and through discussions identified Houchin Community Blood Bank (HCBB) as the only supplier capable of providing timely deliveries and willing to contract with both the PFD and HMH. Because whole blood programs require integration with hospital systems, strict vendor qualifications, and consistent availability of type-specific whole blood, very few suppliers are able or willing to meet these requirements.

To participate in the program, the PFD must have a hospital partner to ensure compliance with blood supplier regulations, manage legal requirements, and limit waste associated with unused blood products. HMH must also maintain an active contract with the selected blood provider for the PFD to operate the program. The selection was based on operational feasibility, compliance, and the ability to safely support the program. Due to the highly specialized operational requirements, and the pool of suppliers for blood banks, it was determined that a direct award would be in the City's best interest.

HCBB is a California non-profit public benefit corporation that has supplied blood and blood components to hospitals and trauma centers in Kern County and the surrounding region since 1951. HCBB is accredited by the Association for the Advancement of Blood & Biotherapies and produces low-titer O whole blood, the product required for pre-hospital transfusion, which it currently supplies to Kern Medical, the region's designated trauma center. HCBB delivers by same-day courier at its own shipping cost and provides credit for unused units returned before expiration, limiting the cost of routine product rotation, and it is the only supplier identified that is willing to contract with both the PFD and HMH. Under Exhibit A to the agreement, low-titer O whole blood is provided at a contract rate of \$675.00 per unit compared to HCBB's non-contract rate of \$820.00 per unit, plus a \$65.00 handling charge per order. Staff finds HCBB qualified to perform and its pricing fair and reasonable, and estimates program costs of \$50,000 annually, or \$150,000 over the initial 12-month term and both one-year renewal terms; the balance of the not-to-exceed amount is requested as contingency.

COUNCIL POLICY CONSIDERATION:

The proposed contract furthers the City Council's strategic planning goals to ensure public safety.

ENVIRONMENTAL ANALYSIS:

CEQA excludes, from environmental review, actions that are not "projects" as defined by Public Resources Code Section 21065 and within the meaning of Section 15378. Sections 21065 and 15378 define a project as an action which may cause either a direct physical change in the environment, or a reasonably foreseeable indirect physical change in the environment. Section 15378(b) excludes from the definition of "project" continuing administrative or maintenance activities, such as purchases for supplies and services. The actions proposed herein, authorizing the City Manager to enter into a new contract with Houchin Community Blood Bank for blood and blood components, is an administrative activity for the purchasing of services, and therefore is not a "project" as defined by CEQA. Since the action is not a project subject to CEQA, no environmental document is required.

FISCAL IMPACT:

The total cost of the pre-hospital whole blood administration program is anticipated to be \$100,000 annually, for a total amount not to exceed \$300,000 over the full contract term if both optional extension periods are exercised. Costs will be incurred only as blood and blood components are ordered and delivered, at the per-unit rates established in the agreement.

Funding will be addressed by utilization of existing and future budgeted appropriations in the Fire Department Emergency Medical Services (EMS) operating budget account for materials and supplies. The City expects to recover a portion of the costs associated with blood administration through the Fire Department's EMS Transport Cost Recovery program and Centers for Medicare and Medicaid Services (CMS) reimbursements. There are no anticipated impacts to other operational programs or capital projects as a result of this action.

Respectfully submitted,

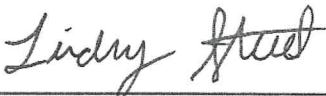


CHAD AUGUSTIN

Fire Chief

Fire Department

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MATTHEW E. HAWKESWORTH

Interim City Manager