COLUMBIA COUNTY EMS

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Columbia County EMS System

Where We Were...

• Fragmented System
  – ALS vs BLS | Paid vs Volunteer
  – Slow response times (17 min avg for 2\textsuperscript{nd} call)
  – Financially unstable – most agencies struggling
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• **What’s Happened / Where Are We…**
  – Societal changes
  – Customer demands – want/expect the best care
  – Fragmentation (ALS/BLS)
  – Constant leadership turnover
  – No one managing the “big picture” (i.e. seven agencies – everyone doing something different)
  – Conflict between customer demands and money available
  – Agencies run as “Clubs” – need Board of Directors with community members
  – “Turf” protection
  – Financial inconsistency / difficulties
  – Volunteerism down
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- Where is EMS Going?
  - Call volume up
  - Increased customer and regulatory demands
  - Less time for people to volunteer
  - Higher levels of learning required
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Strategy...

• Develop countywide cost effective EMS system that is responsive to consumer needs. This system should equalize the cost among all residents of the County for the delivery of this service, while giving it greater stability and accountability through a better governance structure.
Components of an Ideal System...

- Run by Town / Municipality
- Separate from Police / Fire
- Integrate career & volunteer staff
- Be supported by taxes and user fees
- Meet national standards
- Continuous Quality Improvement with oversight from medical director
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When Designing Our System...

• 3 Questions to ask:
  – Is it technically possible?
  – Is it administratively feasible?
  – Is it politically acceptable?

• Need to allow for parochialism
• Need to allow for volunteerism
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- Goals of System
  - Improved EMS delivery to all patients in the county
  - Maintain local control
  - Improved interoperability
  - Better protection for all agencies in the county
  - Public safety and health awareness and syndromic surveillance
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• There is no such thing as a “second call”
  – Every call is a FIRST call for each patient

• County CON
  – Cover Unit Plan can allow for legally safe movement of additional resources
  – Agencies will be protected for county dispatch movement
  – Patients will have improved care throughout the county
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• Plan
  – Each agency maintains primary responsibility for their own territory
  – Each agency contracts for participation in County system
  – County gives them:
    – Payment for standby assignments and 911 calls
    – ePCR system
  – Agency participates by supplying an ambulance to cover the county, when areas become temporarily depleted due to call volume
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• County Goals
  – Ability to have countywide “system status” through 911
  – Continual generation of data on public health of county
  – Ability to rapidly respond to EMS problems without fear of legal repercussions for agencies or providers
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• Advantages for Agencies
  – Improved backup and mutual aid provision (with existing resources)
  – Additional funding stream (insurance recovery, municipal support, county support)
  – Improved experience for each provider because of additional patient contacts
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• Contract with Agencies
  – Advisory Board participation (performance goals / provides general oversight)
  – Guarantee of independence and integrity
  – Oversight of system, both fiscal and operational
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County Municipal CON (2010)...

- Agreement with agencies to cover depleted areas within the county
- Units moved on as-needed basis with Columbia 911 “quarterbacking” the system
- Agencies paid for services (standbys/911 calls)
- System Status Management Plan
  - Developed and overseen by participating agencies
  - Incorporated into Agreement/Contract
  - Outlines agency and 911 dispatch responsibilities
System Benefits...

- Uses existing resources (none added)
- Operationally efficient
- 40% reduction in response times in depleted areas
- Economically feasible
- Structure in place for future needs (i.e. Ebola, servicing shuttered agencies, etc.)
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Statistics...

- Total CCEMS Standby Assignments
  - 2011: 1,476
  - 2012: 2,101
  - 2013: 2,371
  - 2014: 2,043
  - 2015: 2,172
  - 2016: 2,254
  - 2017: 2,465
  - 2018: 2,721
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Statistics...

• Total CCEMS 911 Call Responses
  – 2011: 276
  – 2012: 341
  – 2013: 401
  – 2014: 392
  – 2015: 415
  – 2016: 443
  – 2017: 490
  – 2018: 480
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Statistics...

• Average Duration (Dispatch to In-Service) of CCEMS standbys is 57 minutes

• Average Duration (Dispatch to In-Service) of CCEMS 911 calls is 76 minutes

• Average Response Time (Dispatch to On-Scene) to emergency 911 calls is 11 minutes
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Statistics...

• Summary of Financials
  – Average Yearly Expenditures: $600,000
  – Less Yearly Revenue: $250,000
  – Average Yearly Net Cost to County: $350,000
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Questions?

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