EMS Elsewhere: Ideas and Approaches

Nels D. Sanddal, President/CEO
Critical Illness and Trauma Foundation
Bozeman MT
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About Me

- EMT-B since 1974
- Ambulance Service Director
- Montana State EMS Training Coordinator
- Rural EMS and Trauma Technical Assistance Center
- IOM Member
- ACS Trauma Systems Consultation
- Critical Illness and Trauma Foundation
Critical Illness and Trauma Foundation

- Private Non-Profit Organization - 1986
- Mission:
  To improve the general well being of those at risk for, or affected by, critical illness or trauma by facilitating the evaluation and dissemination of existing and emerging health promotion strategies in prevention, emergency care and recovery.
- Focus:
  Rural EMS and Trauma Systems
Montana Activities

- Research
  - Rural Preventable Mortality Study
  - Alcohol and Subsequent Injury Death
  - Distance Learning
Montana Activities

• Training
  - Computer Network
  - Interactive CD ROM
  - Web-Based
Montana Activities

- Prevention
  - Pediatric etiology
  - Suicide
  - Prevention Plan
- Technical Assistance
  - To state, e.g. Rural AED
  - To locals, e.g. Planning, training activities
Montana Activities

- Virtually All
  - With Federal Funds
    - CIT Applying Directly
    - In Collaboration with EMS Office or Office of Rural Health

- Many of These Activities are State Supported in Other States
Why Is EMS Important in Montana

... nearly 60% of all trauma deaths occur in rural areas despite the fact that only 20% of the nation’s population live in these areas ...

Report on Injuries in America
National Safety Council - 2003
Why Is EMS Important in Montana

Why Is EMS Important in Montana

... death rate in rural area is inversely related to the population density ...

Baker et al, *NEJM* 1987
Why Is EMS Important in Montana

... adjusting for crash characteristics, age, and gender, the relative risk of a rural victim dying in a motor vehicle crash was 15:1 compared with an urban crash victim ...

Maio et al, Accid Anal Prev 1992
Survival

- Local EMS, as part of an integrated, regionalized, coordinated and accountable emergency care system is ESSENTIAL to the health, welfare and survival of Montana citizens.
Rural Workforce Issues
The Findings

“Surveys of state EMS directors have consistently shown recruitment and retention of personnel to be the greatest barrier to the successful provision of rural/frontier EMS”.

Changes in Magnitude

- In surveys of state EMS directors in 2000 and 2004, “24/7 coverage” rose from the 22nd most important rural EMS issue in 2000 to the second most important in 2004.
- “Response time” rose from 20th place in 2000 to 5th in 2004.
The Recommendation

- Federal rural health manpower recruitment and retention planning should be extended to EMS and funding strategies should be implemented through state EMS offices and offices of rural health to provide leadership, technical assistance and funding in programs to recruit, train and support rural and frontier EMS personnel and services.
The Findings

- EMS... is unlike any other field of medicine over one-third of its professional workforce consists of volunteers.
- The benefits of a volunteer system include the significant cost savings from paying personnel.
- However, the challenge in volunteer systems is maintaining a response system that consistently meets the public demand for quality.
Rural Hardest Hit

• A more recent national assessment found that 77 percent of EMS personnel in rural areas are reported to be volunteers, compared to 33 percent in urban areas.
Changing Rural Demographics

- In many rural areas the population is aging as younger residents move away. During the 1990s, more than 300 rural counties in the U.S. experienced a 15 percent or greater increase in their elderly population as a result of migration patterns.
  - There is an increased demand on EMS services associated with a more fragile elderly population.
  - The pool of potential volunteers is reduced.
Changing Volunteerism

- The face of volunteerism is changing overall.
- During the early stages of EMS, it was not uncommon for volunteers to be on-call virtually twenty-four hours a day.
- Today, there are more demands on the volunteers’ time, resulting from the need for two income families and because of other interests vying for the volunteers’ time. Now volunteers are more likely to donate one specific weeknight or a few hours on a weekend.
- As a result, rural EMS agencies are currently faced with volunteer staffing shortages, particularly during the weekday work hours.
Demands on remaining volunteers have been exacerbated by the closure or restructuring of many rural hospital facilities. While these changes have increased the efficiency and viability of the remaining rural hospitals, they have increased the demands placed on rural EMS agencies due to the need for long-distance and time-consuming interfacility transfers. It is not uncommon for many of these transfers to keep a volunteer away from their jobs or families for 3-6 hours or more.
A Quiet Crisis: Minnesota’s Rural Ambulance Services at Risk

Minnesota Department of Health

December 2002
The Findings

Barriers to Recruitment/Retention

- Nature of the work.
- Changing demographics and selective volunteerism.
- Invisibility.
- Time and training demands.
- Training issues.
- High stress and menial tasks.
- Fear of errors/ need for quality medical direction.
- Employment concerns.
- Compensation.
- Retirement.
The Depth of the Problem

• In the current environment of changing demographics and difficulties recruiting volunteers in general, it is hard to predict how well ambulance services will be able to recruit volunteers over the next five to ten years.
  - Many of those interviewed were deeply concerned about their towns becoming retirement communities, with few people available to work on the ambulance squad.
  - Rural economic development and the availability of local ambulance staff are clearly linked.
What Other States Are Doing

- Providing grants to local EMS agencies
- Conducting formal recruitment and retention programs
- Providing retirement programs for volunteer EMS providers
- Providing tax relief incentives to volunteers
- Migrating to paid EMS systems
What Montana Must Do

• Take the problem seriously
  - People are dying needlessly
  - More people will die needlessly in the future

• Find solutions that work
  - Organization and Infrastructure
    • State, Regional and Local
  - Funding
    • System Development and Sustainability
    • Local - Cost of Readiness
    • Personnel - Recognition and Reimbursement