

Program Description

The Emergency Medical Services (EMS) program is responsible to ensure the highest quality medical care is delivered to patients on emergency scenes by District responders, and now includes a second program, mobile integrated health.

Budget Summary

Expenditures	2015-16 Actual	2016-17 Actual	2017-18 Adopted Budget	2018-19 Adopted Budget
Personnel Services	\$ 1,065,856	\$ 1,611,286	\$ 1,169,589	\$ 1,415,484
Materials and Services	314,097	243,215	381,623	473,091
Total Expenditures	\$ 1,379,953	\$ 1,854,502	\$ 1,551,212	\$ 1,888,575

Personnel Summary

Position	2015-16 Actual	2016-17 Actual	2017-18 Budget	2018-19 Budget
Division Chief	1.00	2.00	1.00	1.00
Medical Services Chief	0.00	1.00	1.00	1.00
Medical Services Officer	4.00	4.00	3.00	3.00
Mobile Integrated Health (MIH)	0.00	1.00	0.00	0.00
EMS Specialist ⁽¹⁾	1.00	1.00	1.00	1.00
Total Full-Time Equivalents (FTE)	6.00	9.00	6.00	6.00

⁽¹⁾ Previously EMS Assistant

2018-19 Significant Changes

Personnel costs reflect the transfer from the Training budget to the EMS program for the overtime for three ALS paramedic trainings for \$183,384, as well as budgeted salaries and wages for current employees including 2018-19 PERS and medical rate increases.

Materials and Services expenses for 5320 EMS Supplies includes EMS supplies for new units and District wide supplies and equipment. For 2018-19, account 5320 provides funding for IV pumps, a new medic unit, video laryngoscope blades and additional video laryngoscopes, and automatic defibrillators, among other items. Account 5366, accounts for the service contracts for 59 cardiac monitors. Medical supervision is provided for in Account 5413 (\$147,999). In addition, the District must recertify its Paramedics every two years and accordingly, the certification fees in account 5502 were increased as this is a recertification year.



Status of 207-18 Tactics

- Define key performance indicators (KPI) for EMS services at the individual, unit, division, and system levels.

Goal/Strategy: Goal 2 – Strategy 2.5
Timeframe: 12 months
Partner(s): Information Technology, Patient Records, Hospital QI, Regional STEMI
Budget Impact: Increase required
Measured By: Completed KPI that meet national standards, and generate meaningful outcome/feedback data to Operations and individual crews.
Status: → Ongoing
Status Report: Formalized several Process Action Teams that are responsible for the development of KPIs in the areas of airway management and cardiac arrest.

- Create processes and policy to manage vulnerable populations and high 911 utilization groups.

Goal/Strategy: Goal 2; Goal 3 – Strategy 3.6
Timeframe: 12 months
Partner(s): Partner counties, neighboring response agencies, private ambulance, primary care providers, licensed clinical social workers, TC911
Budget Impact: Increase required
Measured By: Revised internal EMS QI charter and peer review committee restructuring with focus on patient safety. Lowered number of 911 calls placed by frequent callers, lower number of ED visits. Completed written policy.
Status: → Ongoing
Status Report: Completed all policy work associated with forming the Peer Review Committee, and formed the Process Action Teams responsible for managing frequent 9-1-1 users.

- Enhance and diversify EMS and ambulance transport services, and provide for the requisite scope of practice, tools, training and system integration.

Goal/Strategy: Goal 3 – Strategy 3.6
Timeframe: 24 months
Partner(s): Operations, Fire Chief's Office, County EMS Offices, Private Ambulance
Budget Impact: Increase required
Measured By: Increased service types with requisite scope of practice, tools, and training in place. Improved relationships, service delivery, data sharing and billing processes.
Status: → Ongoing
Status Report: Developed transport KPIs, created several job aides and assisted with several transport focused training events.

Status of 2017-18 Tactics, continued

- Develop and expand innovative healthcare partnerships that benefit District goals and Oregon’s Triple Aim initiatives. Secure MIH service contracts that help manage high acuity patients, prevent 911 calls and generate revenue.

Goal/Strategy: Goal 2, Goal 3- Strategy 3.6.1, 3.9
 Timeframe: 18 months
 Partner(s): Integrated Operations, Finance, Fire Chief’s Office, CCOs, Healthcare systems.
 Budget Impact: None
 A new program.
 Revenue generated to offset costs.
 Prevention of 911 calls lower operational costs.
 Measured By:

- Amount of revenue generated.
- Decrease in hospital and emergency department admissions.
- Reduction of 911 calls.
- Patient satisfaction surveys.
- Cost avoidance.

 Status: ≠ No Longer Relevant
 Status Report: Contract MIH services with healthcare partners did not develop as expected. The same concepts will be used internally to better serve the existing patient population.

Additional 2017-18 Accomplishments

- Purchased video laryngoscopes for improved airway management.
- Total EMS kit replacement to a modular task based and ergonomic design.
- Integrated the EMS and MIH Divisions.
- Continued integration of Newberg EMS Transport into TVF&R operations.
- Expanded EMS Protocol, added new ALS medications.



Activities Summary

EMS Service Measures (Calendar year)	2015-16 Actual	2016-17 Actual	2017-18 Actual	2018-19 Projected	2019-20 Estimated
Patient Care Reports Written	23,063	26,940	26,262	27,050	27,862
Number of EMS Responses	36,036	41,440	40,688	41,909	43,166
Cardiac Arrest Survival % V-Fib / Overall	33%/16%	38%/18%	40%/16%	41%/18%	45%-20%

2018-19 Tactics

- Define key performance indicators (KPI) for EMS services at the individual, unit, division, and system levels.

Goal/Strategy: Goal 2 - Strategy 2A,2D,2E,2H; Goal 3 – Strategy 3A
Timeframe: 24 Months
Partner(s): Information Technology, Records Manager, Hospital QI, Regional STEMI, Medical Director
Budget Impact: None
Measured By: Established additional KPI that meet national standards, and generate meaningful outcome/feedback data to Operations and individual crews.

- Create processes and policy to manage vulnerable populations and high 9-1-1 utilization groups.

Goal/Strategy: Goal 2 – Strategy 2F; Goal 3 – Strategy 3A
Timeframe: 12 Months
Partner(s): Partner counties, neighboring response agencies, private ambulance, primary care providers, licensed clinical social workers, TC911
Budget Impact: Increase Required
Measured By: Revised internal EMS QI charter and peer review committee restructuring with focus on patient safety. Lowered number of 9-1-1 calls placed by frequent callers, lower number of emergency department visits. Completed written policy.

- Enhance and diversify EMS and ambulance transport services, and provide for the requisite scope of practice, tools, training and system integration.

Goal/Strategy: Goal 2 – Strategy 2A; Goal 3 – Strategy 3A
Timeframe: 24 Months
Partner(s): Operations, Fire Chief’s Office, County EMS Offices, Private Ambulance, Hospitals
Budget Impact: Increase Required
Measured By: Requisite scope of practice, tools, and training in place for additional service types. Improved relationships, service delivery, data sharing and billing processes.

- Diversify the level of EMS care provided by unit type.

Goal/Strategy: Goal 2-Strategy 2B; Goal 3-Strategy 3A
Timeframe: 24 Months
Partner(s): Operations, Fire Chief’s Office, Training, Logistics
Budget Impact: None
Measured By: Deployment of response units with capability below and above the current Paramedic level of care. Example: Critical Care, and EMT units.

Emergency Medical Services, continued

	2015-16 Actual	2016-17 Actual	2017-18 Adopted Budget	2018-19 Proposed Budget	2018-19 Approved Budget	2018-19 Adopted Budget
10520 General Fund						
5001 Salaries & Wages Union	\$ 386,786	\$ 425,573	\$ 299,130	\$ 262,938	\$ 262,938	\$262,938
5002 Salaries & Wages Nonunion	191,717	433,185	328,958	326,322	326,322	326,322
5003 Vacation Taken Union	47,865	54,337	19,392	37,901	37,901	37,901
5004 Vacation Taken Nonunion	11,108	25,724	22,376	25,381	25,381	25,381
5005 Sick Leave Taken Union	4,001	13,377	5,151	6,317	6,317	6,317
5006 Sick Taken Nonunion	5,273	8,000	5,945	7,252	7,252	7,252
5007 Personal Leave Taken Union	4,430	5,829	2,727	3,158	3,158	3,158
5008 Personal Leave Taken Nonunion	3,558	4,964	3,147	3,626	3,626	3,626
5009 Comp Taken Union	2,123	1,284				
5010 Comp Taken Nonunion	791	488				
5015 Vacation Sold	6,729	22,788	13,446	20,281	20,281	20,281
5017 PEHP Vac Sold at Retirement	5,060	40,072	8,740	10,212	10,212	10,212
5018 Comp Time Sold Union		193				
5020 Deferred Comp Match Union	21,622	24,086	16,320	15,468	15,468	15,468
5021 Deferred Comp Match Nonunion	16,965	40,087	31,507	31,546	31,546	31,546
5120 Overtime Union	2,981	1,751	9,504	193,392	193,392	193,392
5121 Overtime Nonunion		1,260	1,488	3,184	3,184	3,184
5201 PERS Taxes	132,986	211,695	169,514	213,489	213,489	213,489
5203 FICA/MEDI	47,380	67,671	55,239	68,942	68,942	68,942
5206 Worker's Comp	19,350	16,482	15,042	20,520	20,520	20,520
5207 TriMet/Wilsonville Tax	4,791	7,220	5,808	7,149	7,149	7,149
5208 OR Worker's Benefit Fund Tax	182	245	180	180	180	180
5210 Medical Ins Union	79,931	93,343	65,259	69,183	69,183	69,183
5211 Medical Ins Nonunion	39,107	78,253	69,775	69,774	69,774	69,774
5220 Post Retire Ins Union	2,500	2,700	1,800	1,800	1,800	1,800
5221 Post Retire Ins Nonunion	1,800	3,450	2,700	2,700	2,700	2,700
5230 Dental Ins Nonunion	3,929	6,922	6,180	5,443	5,443	5,443
5240 Life/Disability Insurance	1,761	3,977	4,186	3,626	3,626	3,626
5270 Uniform Allowance	1,513	2,892	1,500	1,800	1,800	1,800
5290 Employee Tuition Reimburse	13,855	6,629	3,375	2,700	2,700	2,700
5295 Vehicle/Cell Allowance	5,760	6,810	1,200	1,200	1,200	1,200
Total Personnel Services	1,065,856	1,611,286	1,169,589	1,415,484	1,415,484	1,415,484
5300 Office Supplies	199	467	600	600	600	600
5301 Special Department Supplies	22	204				
5302 Training Supplies	36	327	800	800	800	800
5320 EMS Supplies	113,498	4,575	96,287	109,006	109,006	109,006
5321 Fire Fighting Supplies	31	433	1,125	1,350	1,350	1,350
5325 Protective Clothing	1,458	642	1,250	1,500	1,500	1,500
5330 Noncapital Furniture & Equip	2,190	2,034		4,800	4,800	4,800

Emergency Medical Services, continued

	2015-16 Actual	2016-17 Actual	2017-18 Adopted Budget	2018-19 Proposed Budget	2018-19 Approved Budget	2018-19 Adopted Budget
5350 Apparatus Fuel/Lubricants	1,470	3,965	3,600	4,320	4,320	4,320
5366 M&R EMS Equip	35,452		42,816	42,816	42,816	42,816
5400 Insurance Premium			500	500	500	500
5413 Consultant Fees	82,209	93,946	171,999	147,999	147,999	147,999
5414 Other Professional Services	7,833	36,450	24,530	38,700	38,700	38,700
5415 Printing	76	57				
5418 Trustee/Administrative Fees	54,670	8,960				
5461 External Training	2,276	15,266	7,670	9,890	9,890	9,890
5462 Travel and Per Diem	2,658	10,795	15,072	22,672	22,672	22,672
5471 Citizen Awards	182	115		100	100	100
5472 Employee Recog & Awards		1,800	1,900	1,900	1,900	1,900
5484 Postage UPS & Shipping	47	47				
5500 Dues & Subscriptions	1,321	2,480	5,724	6,038	6,038	6,038
5502 Certifications & Licensing	7,130	60,057	7,050	78,800	78,800	78,800
5570 Misc Business Exp	426	565	300	900	900	900
5571 Planning Retreat Expense	438	31	400	400	400	400
Total Materials and Services	313,624	243,215	381,623	473,091	473,091	473,091
Total General Fund	\$1,379,480	\$1,854,502	\$1,551,212	\$1,888,575	\$1,888,575	\$1,888,575