

Rural EMS Systems of Care

North Dakota Success Stories



A Little Bit About Me

- Been in EMS since 1973
- Attended Paramedic School in 1974
- Worked in both ground and air medical transport programs.
- Work in North Dakota
 - Community Paramedic Coordinator – ND DoH
 - EMS Director – Rugby EMS



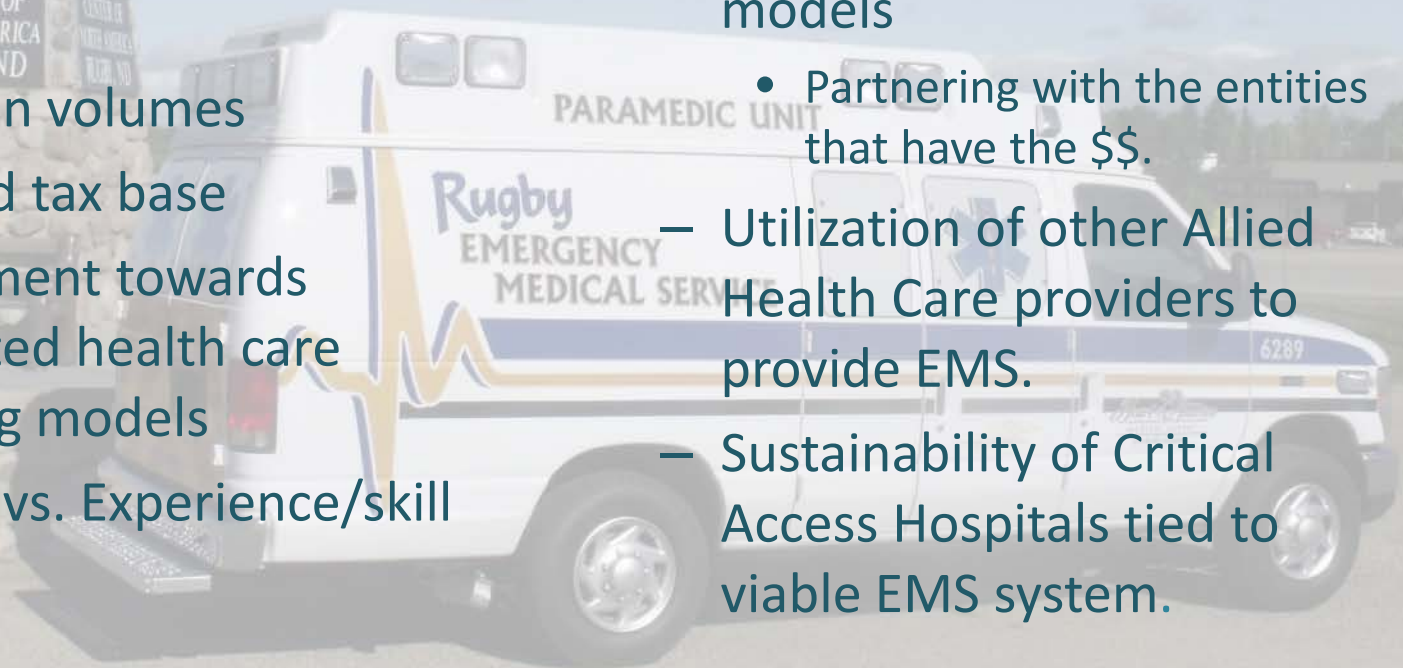
Sustainability of Rural EMS

• Challenges

- Declining rural populations
- Reliance on volunteer labor
- Low run volumes
- Limited tax base
- Movement towards capitated health care funding models
- Acuity vs. Experience/skill levels

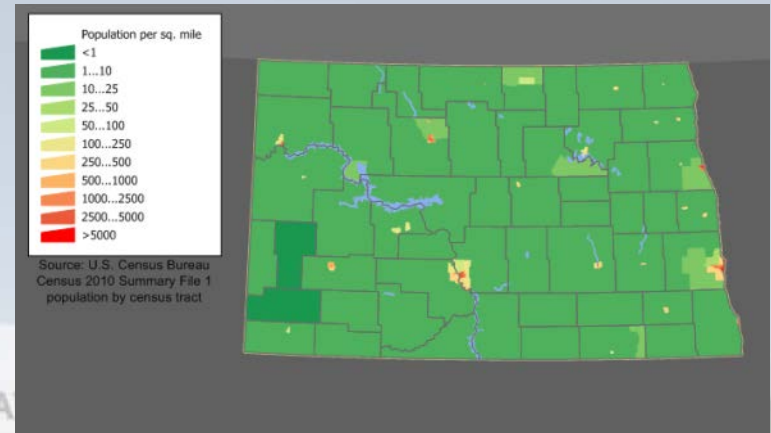
• Opportunities

- Expansion into Mobile Integrated Health Care models
 - Partnering with the entities that have the \$\$.
- Utilization of other Allied Health Care providers to provide EMS.
- Sustainability of Critical Access Hospitals tied to viable EMS system.



NORTH DAKOTA FACTS

- **Population of 739,482** (2014 estimate)
 - 60% live in four(4) metropolitan areas
- **70,700 Square miles**
 - Population density of 11.7 people per square mile.
- **132 licensed Ambulance Services**
- **75,000 EMS responses annually**
 - 85% of those run by 14 services
- **44 Hospitals**
 - 6 Tertiary
 - 38 Critical Access



RUGBY EMS (REMS)

- Operated by the Heart of America Medical Center in Rugby, ND
 - 25 bed Critical Access Hospital
 - Serves a five (5) county region
 - Approximately 8,000 served
- Licensed as an Advanced Life Support Ambulance Service (less than 20 state-wide)
 - Between 600 and 700 responses annually



What Is Unique About REMS ?

- Fully Paid Service
 - Full time staff of 12 – 2 ALS Ambulances
- Goal is revenue neutral to hospital
 - Dropped from 500K to 100K loss in 4 years
 - “The CMS 35-mile Rule”
- Adaptive Philosophy
- Progressive
 - Paid Contractual Medical Director
- Team-Oriented



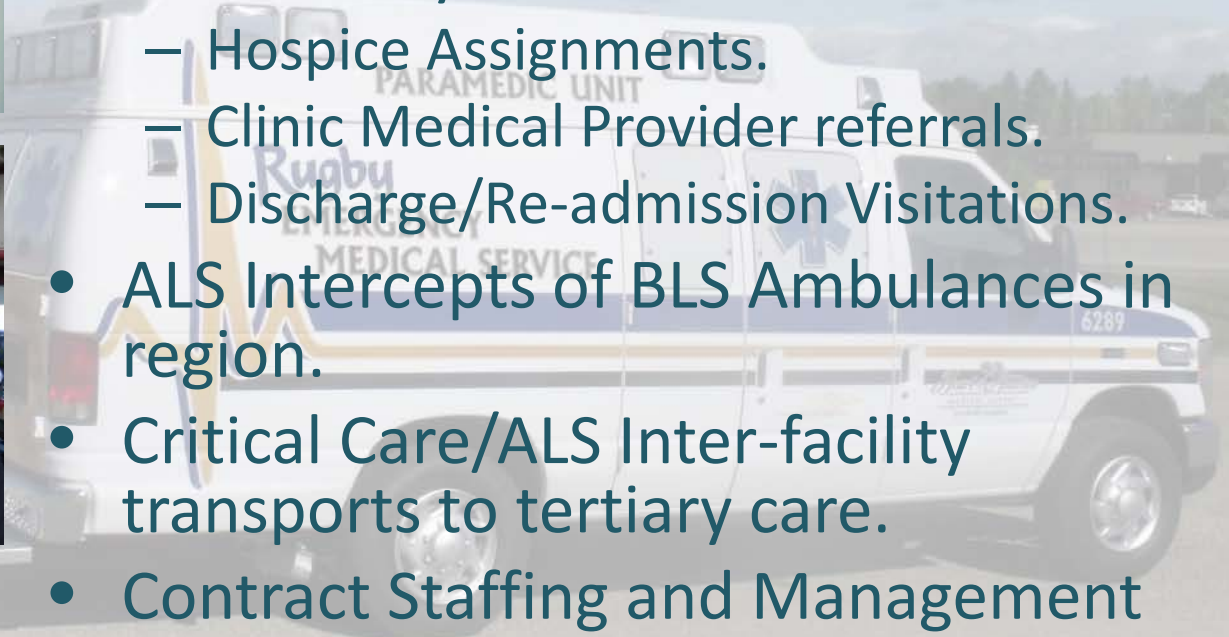
Heart of America
medical center



Value-Added Services



- Supplemental Staffing of Emergency Department.
 - In-house critical care resource
- Community Paramedics.
 - Hospice Assignments.
 - Clinic Medical Provider referrals.
 - Discharge/Re-admission Visitations.
- ALS Intercepts of BLS Ambulances in region.
- Critical Care/ALS Inter-facility transports to tertiary care.
- Contract Staffing and Management of regional EMS services



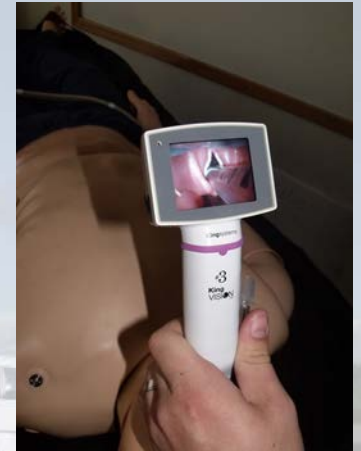
Value-Added Services (cont.)

- Commercial Billing Service serving 50 ND EMS services
- EMS Education Outreach
 - Continuing Education and Initial Courses
 - Participation in State-wide Education Initiatives
- Operate American Heart Association Community Training Center supporting over 200 instructors (CPR, ACLS, PALS).



Multi-Source Funding

- User Transport fees
- Local county mill levies
- State Grant programs
- Grant-Funded Service Improvements
 - Replace/Upgraded 2 ambulances
 - Updated monitor-defibrillators/Lucas 2 devices
 - Radios, Video Laryngoscopes, Ventilators
 - Regional MCI trailer – 25 patient capacity



Quality Measures

- 100% Run Review
- Customer Service Surveys @ 96.7% in all areas.
- Airway Skills Proficiency Requirements



Other Systems in ND



- Collaborative Arrangements
 - Shared Services & Personnel
 - Sub-Stations
 - Staffing Programs



THE FUTURE?

