South County EMS

Serving the towns of

Deerfield, Sunderland, and Whately MA
Where We Are
What We Are

• First regional municipal EMS third-service in Massachusetts.

• Three town partnership to provide 24/7 ALS (Paramedic) transporting ambulance response.
  – Primary response area covers 70 square miles and population of 10,305.
  – Mutual Aid area an additional 91 square miles and population of 28,000.
Background

• Deerfield
  – Municipal 16/7 (FT + volunteer) EMS Department (EMT-Basic)
  – 600 calls annually.

• Sunderland
  – Municipal volunteer Fire Department (EMT-Basic)
  – 250 calls annually

• Whately
  – Municipal volunteer Fire Department (EMT-I)
  – 150 calls annually
Background

- All three agencies struggled to staff ambulances when 911 calls came in.
- ALS services provided as an “intercept” from for-profit agencies in Greenfield or Northampton.
Formation

• Deerfield identified critical need to provide higher level of EMS service to the community.
• Approached Sunderland and Whately regarding their similar situation with proposal to "regionalize" EMS services.
• Franklin Regional Council of Governments (FRCOG) study done.
“Baxter Report”

• *Bruce Baxter and Associates* hired to generate report outlining EMS shortfalls in the southern Franklin County region.

• Five solutions proposed (with staffing recommendations).
  1. Add paid staff.
  2. Merge fire and EMS departments.
  3. Outsource EMS responsibilities.
  5. Continue current model with additional ALS component.
Regionalizing Process / Time Line

• EMS concerns publicly identified in 2011. Regionalization considered as one option and working group formed.
• Baxter Report released Feb 1\textsuperscript{st}, 2012 under FRCOG grant.
• Working group discussed findings and recommended regionalized EMS approach. Budget and staffing requirements determined. Developed IMA.
• Proposal outlined and approved at three separate special town meetings (October 2013).
• Board of Oversight formed (November 2013).
• EMS Director hired (March 2014).
• Go-Live Date: 7/1/2014 (initially set for 1/1/14)
Makeup

- **Board of Oversight**
  - Each town appoints 2 members.
    - Initial makeup is 1 select board member and the existing EMS director from each town.
  - Fiscal Agent representative and EMS Director both non-voting members.
  - Allows for stakeholders to have seat at table and information to flow in both directions.

- **Fiscal Agent**
  - Town of Deerfield chosen to manage accounts.
Budget

• Enterprise Fund used.
  – Service accountable for all costs, including personnel/benefits.

• Total budget determined. Revenue from billing estimated. Difference assessed to member towns.

• Assessment based on population / usage information.
Budget

• Total Budget: $1,129,733
  – Estimated Billing Revenue: $380,138

• Amount Assessed to Towns: $749,595
  – Deerfield: $387,999 (52%)
  – Sunderland: $235,947 (31%)
  – Whately: $125,647 (17%)
Implementation Headaches

• What do you do with existing staff?
  – Deerfield: 3 FT staff (EMT and Paramedics)
  – Sunderland: 1 FT EMT/Firefighter

• What do you do about new staff?
  – Good EMS providers rarely jump at the chance to change jobs.

• How do you handle regulatory oversight?

• Who is responsible for things?
  – BoO
  – Town of Deerfield
On Going Headaches

• Who is responsible for things?
  – BoO
  – Town of Deerfield
    • Compensation for fiscal agent duties?
    – Finance Committees
• Permanent Home / Facility
• History and Pride
Lessons

- Incredible “bang for the buck.” The system works and is a huge improvement in medical care at a fraction of the price to the individual town.
- Requires the correct political climate.
  - Elected officials and town’s people.
  - Appreciation for need to increase service to the community.
Lessons

• Towns organized a committee to discuss which approach to regionalization made the most sense. Never really discussed whether regionalization actually made sense.
  – Existing staff were more-or-less kept out of the loop.
• Board of Oversight is a cumbersome solution to a problem that may or may not have existed.
• IMA requires some things to be voted on by all three member towns.
Would We Do It Again?

Yes!

• Undeniably beneficial to everyone involved and at a fraction of what it would otherwise cost each town.

• Consider different models for a “regionalized” service.