



Becoming Irreplaceable

*Building and Maintaining Effective
Community & Media Relations*

Matt Zavadsky, MS-HSA, EMT
Public Affairs Director
MedStar Mobile Healthcare

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What we're gonna do...

- Show why you are here
- Identify the primary stakeholders in the changing health care market
- Learn how to determine the key issues for these stakeholders
- Learn how to partner with previous competitors to attack common problem issues
- Develop relationships with high impact partners in the community and the media



Halloween in Las Vegas!





Question??

- How has “EMS” done in proving value?



Ambulance Driver

(Dry - vuhr) noun

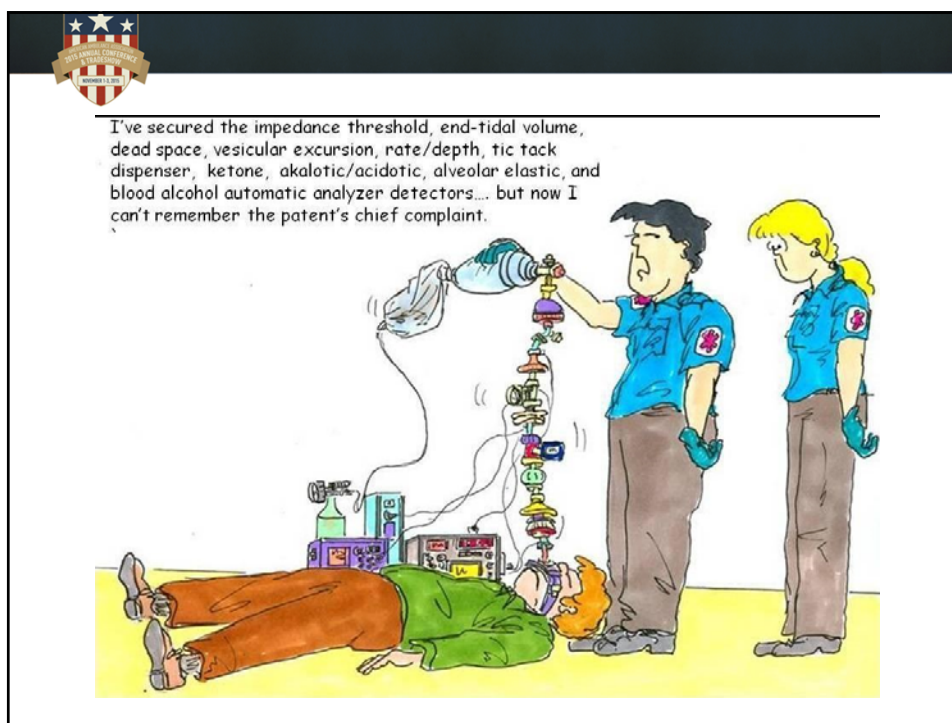
Specially trained career professionals who also work with FIRE TRUCK DRIVERS and POLICE CAR DRIVERS



See also : EMT, Paramedic



Jeff E. Cook





**Reality
Check...**



Actually, we're an alternative ambulance...



Police transport a good bet for shooting victims, study finds

By Tom Avril, Inquirer Staff Writer

January 8, 2014

From 2003 through 2007, gunshot victims taken to city trauma centers by police survived two-thirds of the time - the same rate as those taken by emergency medical squads, according to a new University of Pennsylvania study.

When the researchers took into account the severity of the injuries, the survival rate for those taken to emergency rooms by police was slightly better than for those delivered by ambulance.

When the authors considered all cases of "penetrating trauma" - gunshots and stabbings - the survival rates for those taken by police and those going by ambulance were statistically equivalent.

The Philadelphia Inquirer

http://articles.philly.com/2014-01-09/news/45995105_1_gunshot-victims-police-car-shooting-victims



More Advanced Emergency Care May Be Worse for Cardiac Arrest Victims: Study

Good CPR, getting to hospital fast resulted in better outcomes than using sophisticated methods

Steven Reinberg, HealthDay Reporter

Nov. 24, 2014



Advanced life support given by paramedics to cardiac arrest victims may cost lives rather than save them, researchers report.

The best treatment might just be good CPR given by paramedics or emergency medical technicians and getting the patient to the hospital as fast as possible, the Harvard University researchers noted.

"We find survival is longer with basic life support than advanced life support, which calls into question the widespread assumption that advanced pre-hospital care improves outcomes in cardiac arrest compared with basic life support," said study author Prachi Sanghavi, a Ph.D. student in the Harvard Program in Health Policy.

<http://health.usnews.com/health-news/articles/2014/11/24/more-advanced-emergency-care-may-be-worse-for-cardiac-arrest-victims-study>



Need an ambulance? Why you may not want the more sophisticated version

By Lena H. Sun

October 12, 2015

The Washington Post

Patients who are having a heart attack, stroke or other serious health emergency have a greater chance of surviving if they're taken to the hospital in a basic life-support ambulance rather than one loaded with sophisticated equipment, according to a study released Monday. **The results were published in *Annals of Internal Medicine*.**

Contrary to what most people might think, critically ill patients actually do better when transported in the more basic ambulances staffed by emergency medical technicians, instead of advanced life-support vehicles that have paramedics equipped to perform more invasive procedures.

Research has shown that crews on advanced ambulances take longer to perform those invasive procedures, in part because they don't have as much practice as clinicians in hospitals, Sanghavi said.

By comparison, crews on basic life-support ambulance use more rudimentary techniques; their focus is getting patients to the hospital quickly. For someone in respiratory distress, for example, they would use a bag-mask respirator that is put over the individual's face.

<https://www.washingtonpost.com/news/to-your-health/wp/2015/10/12/need-an-ambulance-why-you-may-not-want-the-more-sophisticated-version/>



More cardiac arrest patients treated with basic life support lived to leave the hospital than those treated with advanced life support (13 percent versus 9 percent). Also, more patients given basic life support were alive 90 days after the event than patients given advanced life support (8 percent versus 5 percent), the investigators found.

Moreover, patients treated with basic life support were less likely to have poor mental functioning than those treated with advanced life support (22 percent versus 45 percent), the findings showed.

Dr. Michael Callahan, an emergency medicine specialist at the University of California, San Francisco, and author of an accompanying journal editorial, said these results are not surprising. Current practice is for paramedics not to waste time intubating patients or giving drugs, as these measures haven't been shown to improve outcomes.

"We know that high-quality CPR, basic airway management and rapid defibrillation matter," he said. "There are studies that show that advanced life support doesn't matter. You don't have better survival. So, you are just doing more things and it takes more time."



How the Government Views Us



5 ambulance firms to pay \$11.5m to settle kickback lawsuit

By Associated Press

May 4, 2015

SAN DIEGO (AP) — *Five Southern California ambulance companies will pay more than \$11.5 million to settle federal allegations that they paid kickbacks to hospitals.*

The U.S. attorney's office says the agreements were contained in lawsuit documents unsealed Monday in San Diego federal court.

The federal whistleblower lawsuit claimed the companies offered services at steep discounts or even below cost to hospitals and skilled nursing facilities in exchange for exclusive rights to handle lucrative Medicare patient referrals.

The government alleged the arrangements led to false Medicare claims for transport.

The companies were based in Orange County and San Diego.

U-T
San Diego

<http://www.utsandiego.com/news/2015/may/04/5-ambulance-firms-to-pay-115m-to-settle-kickback/>



Ambulance Company Operators Face Health Care Fraud Charges

September 25, 2013



PHILADELPHIA (CBS) — *The operators of Montgomery County Ambulance Company are charged with improperly billing Medicare for millions of dollars for unnecessary medical transports of dialysis patients and paying some patients bonuses for cooperating in the scheme.*

Prosecutor Beth Leahy says the company billed Medicare for \$4.4 million and received a total of nearly \$2.4 million for the transports from September 2010 through August of this year.

She says the couple also got patients involved.

“The defendants were paying some dialysis patients bonuses, which would be illegal kickbacks, in order to induce them to ride with Superior because they did not need ambulance transport,” Leahy said.

<http://philadelphia.cbslocal.com/2013/09/25/ambulance-company-operators-charged-with-medicare-fraud/>



Millions Lost Yearly to Ambulance Companies Acting Like a ‘Taxi Service’

Jan 16, 2015

Every year, \$350 million in ambulance services is lost to or ripped off by companies, according to the Centers for Medicaid and Medicare Services.

“Ambulances are transporting patients that are healthy enough to travel by other means.

ABC News went on patrol with federal agents in Huntington Valley, a suburb outside of Philadelphia, Pennsylvania.

Huntington Valley is an area where there are more ambulance companies than taxi companies. The Philadelphia area is one of five cities that include New York, Houston, Los Angeles and Atlanta that are considered high risk for ambulance fraud.

One undercover video showed patients — Medicare beneficiaries — riding in the front seat of an ambulance as they were taken to a doctor’s appointment.

What should have been a \$20 cab ride now skyrocketing to more than \$400 round-trip, all paid for by Medicare.



<http://abcnews.go.com/blogs/politics/2015/01/millions-lost-yearly-to-ambulance-companies-acting-like-a-taxi-service/>



Think the E.R. Is Expensive? Look at How Much It Costs to Get There

By ELISABETH ROSENTHAL

December 4, 2013

Although ambulances are often requested by a bystander or summoned by 911 dispatchers, they are almost always billed to the patient involved. And the charges, as well as insurance coverage, range widely, from zero to tens of thousands of dollars.

In such a fragmented system, it is hard to know how much high-priced ambulance transport contributes nationally to America's \$2.7 trillion health care bill. And total out-of-pocket expenditures by individuals are hard to tally.

The New York Times

http://www.nytimes.com/2013/12/05/health/think-the-er-was-expensive-look-at-the-ambulance-bill.html?hp&_r=1&



But Medicare, the insurance program for the elderly, does tabulate its numbers and **has become alarmed at its fast-rising expenditures for ambulance rides: nearly \$6 billion a year, up from just \$2 billion in 2002.**

Some will grant coverage if the destination was an emergency room, regardless of the patient's status, **but others may require admittance to the hospital as evidence that the condition was serious.** **"Insurers will generally cover if you had good reason to believe there was a serious threat to your life or health," said Susan Pisano, a spokeswoman for America's Health Insurance Plans, an industry group.**

The New York Times

http://www.nytimes.com/2013/12/05/health/think-the-er-was-expensive-look-at-the-ambulance-bill.html?hp&_r=1&



Medicare's \$5 Billion Ambulance Tab Signals Area of Abuse

By Shannon Pettypiece
April 24, 2014

**Bloomberg
Businessweek**

The patient smoked cigarettes in the passenger seat of the ambulance every week, chatting with the driver while taxpayers foot the \$1,000 bill to drive him four blocks for his dialysis treatment.

The routine was part of a \$1.5 million scheme to defraud Medicare by Penn Choice Ambulance Inc., according to an indictment against the Philadelphia company. The case helps explain part of why Medicare paid \$5 billion to ambulance companies in 2012, more than went to cancer doctors or orthopedic surgeons, according to newly released federal data.

The U.S. Department of Health and Human Services has identified ambulance service as one of the biggest areas of overuse and abuse in Medicare-- companies billing millions for trips by patients who can walk, sit, stand or even drive their own cars.

<http://www.bloomberg.com/news/2014-04-24/medicare-s-5-billion-ambulance-tab-signals-area-of-abuse.html>



Ambulance employee stole prescription pads to buy drugs

Kim Wendel
April 1, 2015

3 wky.com
see the possible

Sheriff said he stole blank prescription pads from 8 doctors to get drugs for himself and 2 family members

RAVENNA, Ohio -- The Portage County Drug Task Force caught up with a Rootstown man who used his job as an ambulance company employee to steal eight doctors' blank prescription pads to forge prescriptions for drugs worth an estimated \$20,000.

Case, an employee of a local ambulance company, used his position that allowed him access to medical facilities where he was able to obtain the blank prescription forms.

Case was charged with 16 counts of F-5 Forgery, 16 counts of F-4 Illegal Processing of Drug Documents, one count of F-2 Deception to Obtain Dangerous Drugs, two counts of F-3 Deception to Obtain Dangerous Drugs and four counts of F-4 Deception to Obtain Dangerous Drugs.

<http://www.wky.com/story/news/local/portage-county/2015/04/01/local-ambulance-employee-charged-with-forging-prescriptions/70773356/>



Ex-Ambulance Co. Owner Gets 6 Years In \$2M Fraud Scheme

By Margaret Harding
April 01, 2015



Washington -- A former co-owner of a Pennsylvania ambulance company, who pled guilty to defrauding Medicare of nearly \$2 million by paying kickbacks to drive patients who didn't need ambulance services, was sentenced to six years in prison on Tuesday by a Pennsylvania federal judge.

Nazariy Kmet, former co-owner and president of Life Support Corp., asked for house arrest or probation, but prosecutors urged the judge to follow sentencing guidelines that called for 70 to 87 months in prison in exchange for Kmet's guilty plea of health care fraud conspiracy and paying kickbacks. The judge sentenced Kmet to 72 months in prison and ordered him to pay about \$2 million in restitution.

Attorneys for Kmet, a native of Ukraine who came to the U.S. when he was 18, said the father of two has worked hard his entire life and is not the "immoral and greedy thief" prosecutors made him out to be.

<http://www.law360.com/articles/638264/ex-ambulance-co-owner-gets-6-years-in-2m-fraud-scheme>



Feds Crack Down on Ambulance Companies

Officials report spike in fraudulent billing practices
Apr 09, 2015



WESLACO, TX - Federal investigators say a new kind of Medicaid and Medicare fraud has taken root in the Rio Grande Valley. They now have dozens of cases to pursue.

In one case, an ambulance company in McAllen billed the federal government for multiple trips to dialysis clinics. Each trip cost taxpayers about \$800. Investigators found out there were no trips at all. It was a case of "phantom billing."

In Roma, companies billed the federal government \$1 million in 2012. By 2014, that number had doubled. In McAllen, claims jumped by nearly \$3 million during that time. By the time investigators give chase, the company has closed shop and opened up under a new name somewhere else.

Investigators say it's why ambulance companies are popping up all over the Valley. There are currently 62, far more than the area needs.

It's also why billings have doubled in the past two years. Even taking into account the Valley's sick and elderly population, investigators say that growth is statistically impossible.

<http://www.krgv.com/news/local-news/Feds-Crack-Down-on-Ambulance-Companies/32288394>



Ambulance employees tailed man from Pa. casino and robbed him in his driveway, cops say

By Kevin Shea | For NJ.com

July 01, 2015



FLORENCE - ***Two private ambulance company employees are charged with robbing a Florence man at gunpoint in his driveway after following him from Parx Casino*** in Bucks County, Pa., police said.

Wayner Segura, 29, and Jahyquiriz Ramos, 27, both of Philadelphia, are charged with robbery in connection with the April 8 crime. They are charged with robbing the victim of "various items."

Boldizar said ***the suspects are employees of a private ambulance company and allegedly followed the victim in a company ambulance.***

Court documents show the company is American Ambulance Services in Philadelphia.

http://www.nj.com/mercer/index.ssf/2015/07/ambulance_employees_tailed_man_from_pa_casino_and.html



Not Just "Privates"





Ellis County Fire Chief, Asst. Fire Chief Arrested in Connection With Sexual Assault Case

By Frank Heinz

Thursday, Apr 9, 2015



At an emergency meeting Thursday night, board members who oversee the Ellis County Emergency Services District No. 6 Volunteer Fire Department voted unanimously to suspend the fire chief and assistant fire chief from duty.

The meeting was called after Fire Chief Gavin Satterfield, 31, and Assistant Fire Chief William Getzendaner, 34, were arrested after being implicated in a recorded sexual assault that took place in a fire station earlier this year.

A man - whose identity was not released because he is a sexual assault victim - filed a complaint March 31 stating that on Jan. 20 five fellow firefighters held him down at the Emergency Service District No. 6 fire station, pulled his pants down and, while laughing and yelling, sexually assaulted him multiple times with a dildo and a broom stick.

<http://www.nbcdw.com/news/local/Ellis-County-Fire-Chief-Asst-Fire-Chief-Arrested-in-Connection-With-Sexual-Assault-Case-299233991.html>



City of San José
Operations Efficiency Diagnostic



PUBLIC SECTOR B2M GLOBAL BUSINESS SERVICES

Final Report
Fire and Emergency Medical Services

Las Vegas, Nevada
November 2012



Submitted by
ICMA Center for Public Safety Management
International City/County Management Association
177 North Capitol Street, Suite 500
Washington, DC 20002
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ICMA
Innovators at the Core of Better Communities

Final Report
Fire Operations

City of Grand Rapids, Michigan
August 2012

ICMA CENTER FOR PUBLIC SAFETY MANAGEMENT



Submitted by
ICMA Center for Public Safety Management
International City/County Management Association
177 North Capitol Street, Suite 500
Washington, DC 20002

ICMA
Innovators at the Core of Better Communities



Fla. County Calls for Controversial EMS Cuts

February 5, 2014

THE TAMPA
TRIBUNE

Pinellas County is proposing that fire departments reduce the number of paramedics on duty overnight when the volume of 911 calls drops.

At a heated meeting Tuesday, **a majority of commissioners said they support cutting \$2.3 million from the \$40.4 million the county pays every year to Pinellas' 18 fire districts to serve as medical first responders.**

The county is proposing that fire departments reduce the number of paramedics on duty overnight when the volume of 911 calls drops, although it would be up to fire departments to decide how they implement any changes.

But commissioners hope the plan can end a decades long battle between the county and cities over EMS costs. **The proposal is estimated to save the county up to \$18 million in the first three years and as much as \$60 million over 10 years. It would enable commissioners to freeze EMS property taxes during the next four years,** officials said.

<http://tbo.com/pinellas-county/pinellas-commission-calls-for-911-cuts-20140205/>



Slow Response Times Prompt Penalties in San Jose, California

February 5, 2014

San Jose Mercury News

San Jose hasn't met the county's 911 medical response time target for a single month since summer 2012.

Santa Clara County supervisors slapped the San Jose Fire Department with big penalties for its 911 medical response times, which have been so slow that crews have been showing up late to emergencies about once per hour over the last year.

The city gets about \$2.1 million in county funding per year, which is equivalent to the operation of one fire station. But the money is contingent on crews responding to at least 90 percent of emergencies within eight minutes, a mark the department has failed to meet for 14 straight months.

San Jose officials declined to show up and defend themselves at the meeting for the second time in as many months, which dismayed county leaders to the point where they considered pulling the contract with the city altogether. That would lead county ambulances to respond to medical emergencies first instead of San Jose firefighters, an option the county will now begin studying.

http://www.mercurynews.com/crime-courts/ci_25060655/san-joses-slow-911-medical-responses-prompt-big



Is the Current Model for Public Safety Service Delivery Sustainable?

Fiscal realities may require operational changes

by Leonard Matarese, ICMA

September 2013 • Volume 95 • Number 8



The dramatic challenges that local governments faced over the past five years have forced a complete rethinking of how cities and counties operate across the board. **Until the latest fiscal challenges, public safety operations were typically immune from close scrutiny because elected and appointed officials feared that they would be accused of endangering the public's safety.**

So managers finally began to scrutinize the internal operations of police and fire agencies, only to discover that the percentage of their operating budgets devoted to public safety had increased. **ICMA's Center for Public Safety Management (ICMA/CPSM) team members have seen numerous communities where the public safety budget exceeds 75 percent.**

<http://webapps.icma.org/pm/9508/public/cover.cfm>



This forced a complete rethinking of what public safety agencies did and how they did it. We've seen police and fire departments take significant staff reductions while retreating back to their core missions. **The end result has been that staffing and funding levels for police and fire agencies have been dramatically reduced with little or no impact on outcomes or the public's perception of safety.** This information is supported by research, including a recent study by the Police Executive Research Forum.

During the past five years, ICMA/CPSM has worked with more than 100 local governments of all sizes providing at least 180 technical assistance projects in police and fire operations. **ICMA's team members were consistently surprised to see significant opportunities for additional cost reductions, even in places where there had already been reductions in force.**

ICMA
PUBLICATIONS



In most communities, medical calls constitute some 80 percent of call volume. This rapid expansion of EMS has occurred with minimal cost-benefit analysis and few challenges to the underlying assumptions in place when the EMS systems were created some 40 years ago.

When ICMA analyzed actual workload versus staffing levels, we found a significant disconnect between what the assumed workload is and what the reality is in public safety departments.

It is not unusual to see staffing levels twice the number or higher than what the workload calls for.



NY city to cut firefighters, auction ambulances

A private company will take over rescue calls as Lockport seeks to borrow \$5 million to keep the city afloat

Thomas Prohaska
August 28, 2014

THE BUFFALO NEWS

LOCKPORT, N.Y. — The cash-strapped city plans to auction off its two ambulances and to reduce Fire Department minimum staffing from nine firefighters per shift to six as of Sept. 15, Mayor Anne E. McCaffrey said Wednesday.

“I’m absolutely not surprised,” Lockport Professional Fire Fighters Association President Kevin W. Pratt said. “The judge paved the way for this with his decision.” **He was referring to the June 25 ruling by State Supreme Court Justice Ralph A. Boniello III that canceled a restraining order preventing the city from cutting minimum manning in the Fire Department from nine to seven per shift.**

The city budgets about \$600,000 a year in revenue for ambulance billing, but McCaffrey said last week it costs about \$1 million to provide the service, counting salaries, overtime and operating expenses.

<http://www.buffalonews.com/city-region/lockport/lockport-plans-to-auction-off-ambulances-cut-fire-staffing-minimum-20140827>



Kalispell Voters Reject EMS Levy Request

Voters deny request for additional EMS funds, forcing city to look at ways to maintain level of service with aging resources and increased call loads

Nov 8, 2014

By Dillon Tabish,

Kalispell staff will work to provide the same level of emergency medical services despite falling short in a bid for a funding boost in last week's election, according to the city manager.

Doug Russell said the goal behind the citywide ballot measure, which sought \$736,000 annually in mill levy funds for municipal EMS, was to let residents decide the level of service that the city would provide.



http://www.dailyinterlake.com/news/local_elections/kalispell-voters-reject-extra-taxes-for-ems/article_1f59ab7c-64bf-11e4-8b3b-fbfb3b203342.html



Who do we need to prove value to?

- **Internal stakeholders**
 - Current Employees
 - And their families!?
- **External stakeholders**
 - Healthcare Partners
 - Potential employees
 - Elected & appointed officials
 - Medical Director
 - Co-Responders
 - Community Influencers
 - Media



Employees & Families

- **Show them they matter!**
 - Just culture
 - Make decisions
 - Empowered work teams
 - In their environment
 - Be accessible
 - In front of peers/managers
 - Off hours
 - Recognition
 - Letters to families/loved ones
 - Invite to events
 - Acknowledge family sacrifices
 - Letters to families/loved ones
 - Invite to events
 - Have FUN!!





Healthcare Partners

- **Volume to Value**
- **5 R's**
 - Especially ACO or Shared Risk Patients
- **Shared Risk Arrangements?**
- **Quality**
 - Payment based on...
- **Patient Experience**
- **Safe Care Transitions**
 - Pre and post hospitalization
- **Patient navigation**

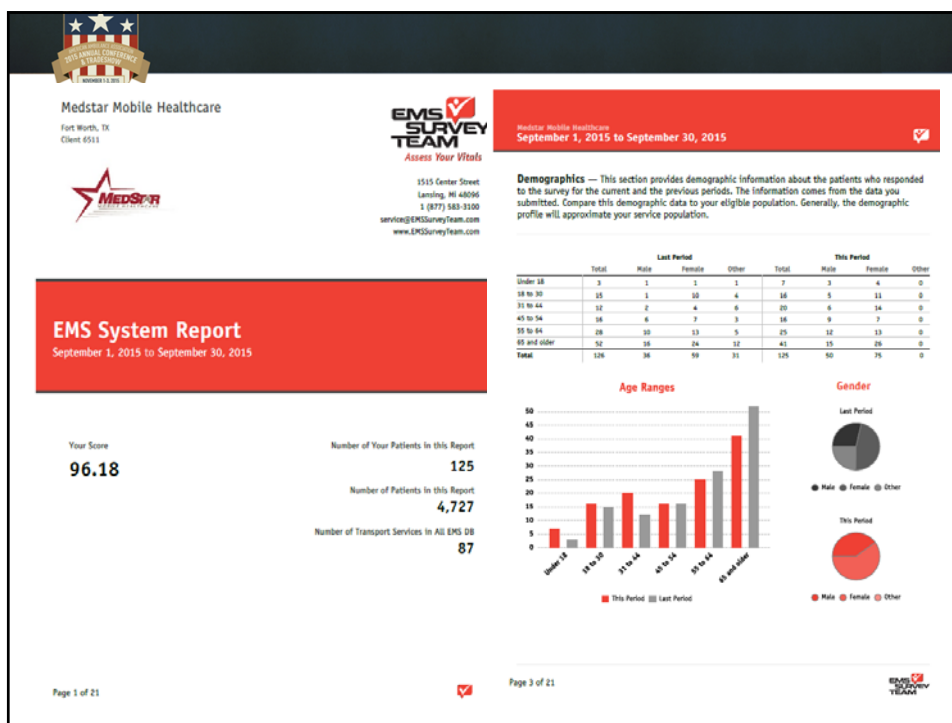


Healthcare Partners

- *“One of the ways that the government will look to reduce costs is to move away from paying for services that have no measurable benefit on patients’ health status or outcomes.”*
- *“...the future will belong to those who can irrefutably demonstrate their benefit on the health of their patients.”*





Doug Wolfberg
Legal Consult, EMS Insider, November 2009



Healthcare Partners

- **Know them...**
- **Make sure they know you**
 - F2F and reports
 - Timeliness, customer satisfaction
- **Quarterly CEO Meetings**
- **Give them a say**
 - Interview panels (2-Way)
- **Know their issues/concerns**
- **Be a problem solver**
- **Support their initiatives**
 - Fund raisers and Task Forces

IMPROVING TOGETHER

There Is A Difference


cardiac care | neurosciences | oncology | orthopedics | specialty surgery

Matt,

I want to thank you for everything you did to facilitate my ride-along with MedStar. It was truly an eye-opening experience. Our community is so blessed to have such dedicated and caring professionals working for MedStar!!


Warm regards,

Clay F. **Clay Franklin**
Chief Executive Officer



Heart-Attack Patients More Likely To Die After Ambulances Are Diverted

By Barbara Feder Ostrov
August 31, 2015



Heart-attack patients whose ambulances were diverted from crowded emergency rooms to hospitals farther away were more likely to be dead a year later than patients who weren't diverted, according to a recent study published in the journal Health Affairs.

Some hospitals see diversion as a necessary safety valve for full-up emergency rooms. But emergency care experts say they push the crowding problem to nearby hospitals and can compromise patient care, especially in life-threatening cases.

The researchers found that heart-attack patients whose ambulances had been diverted to an emergency room farther away were nearly 10 percent more likely to be dead one year later than those whose ambulances were not diverted.

"It still boils down to lack of resources to meet the demand," Elliott said.

B.J. Bartleson, vice president of nursing and clinical services for the California Hospital Association, said the state's hospitals are working with local EMS agencies to make sure patients get to the right hospital at the right time.

<http://khn.org/news/heart-attack-patients-more-likely-to-die-after-ambulances-are-diverted/>



Potential Employees

- **Current Ambassadors**
- **Industry Image**
- **Clinical Rotations EMT/Medic Schools**
- **Alternate & “passive” recruitment**
 - Messaging
 - Social Media



Leila Peebles

October 23 at 3:47pm

JOB POSTING

Position: Call-Taker/System Status Controller (Full-time)

Reports To: Communications Center Supervisor

Salary Range: \$14.51 - \$15.96 (offers based on applicable experience)...

[See More](#)



Careers @ MedStar Mobile Healthcare

At MedStar, we also do things a little differently. We value innovative thinking, use cutting-edge technology and look for the very best people in the EMS...

[MEDSTAR.CANDIDATECARE.JOBS](#)

Like

Comment

Share



Elected & Appointed Officials

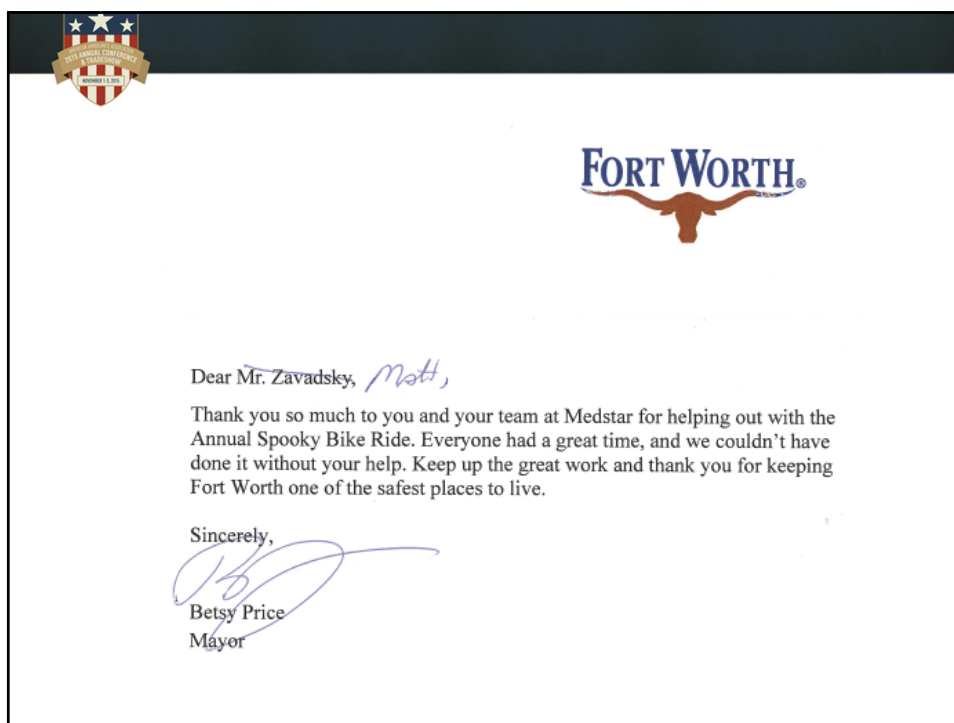
- **Provide rock-solid service**
 - No complaints!
- **Keep them informed**
 - Routine and incident-based information
- **Give them a “say”**
 - Interview panels (2-way)
- **Promote their projects**
- **Be careful with “politics”**
 - Treat all equally



Kelly Allen Gray
Councilmember

Dear Jon and David,
On behalf of my brother-in-law Aaron Gray and my entire family, thank you for the care and concern you showed us on the early morning of June 14th when my sister-in-law was found deceased in their home. Your compassion and words of comfort were heart-felt and needed in our time of sorrow. Med Star and the center you serve are blessed to have you both!

Sincerely,
Kelly Allen Gray




Medical Director(s)

- **Be a Partner**
- **Give them a say**
 - More than just credentialing
- **Keep them informed**
 - Incidents
- **Support their projects**
 - Studies
 - Presentations
 - Articles

Blueprint for Quality

Medical Direction and Oversight
for
911 and Mobile Healthcare



ORIGINAL RESEARCH

Assessing call demand and utilization of a secondary triage emergency communication nurse system for low acuity calls transferred from an emergency dispatch system

Mark Conrad Fivaz, MD¹; Greg Scott, MBA²; Jeff Clawson, MD²; Corike Toxopeus, PhD²; Matt Zavadzky, MS³; Kristen Miller, JD⁴; Neal Richmond, MD⁴; Christopher Olola, PhD²

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Keywords:
Emergency Communication Nurse System, call triage, resource utilization, low acuity calls, nurse triage, emergency dispatch, Medical Priority Dispatch System

Citation:
Fivaz M, Scott G, Clawson J, Toxopeus C, Zavadzky M, Miller K, Richmond N, Olola C. Assessing call demand and utilization of a secondary triage emergency communication nurse system for low acuity calls transferred from an emergency dispatch system. *Annals of Emergency Dispatch and Response*. 2015;3(2):11-15.

Incident types within the Emergency Communication Nurse System (ECNS) and found that 9-1-1 triage systems yielded a variety of low acuity complaints that were handled by the Emergency Communications Nurse (ECN). This study explored the current and potential utilization for triaging low acuity calls transferred from 9-1-1.

Objectives: To determine the utilization potential of a secondary nurse triage system in handling low acuity calls transferred from a 9-1-1 emergency dispatch system.

Methods: This descriptive, retrospective study involved two 9-1-1 communication centers in the United States of America (USA). The primary endpoints were the frequency of cases triaged using the ECNS, and the frequency of cases that could have been triaged based on the Medical Director-approved Emergency Medical Dispatch (EMD) determinant codes if the resources had been available to accept them.


Results: Overall, 2,728 cases were triaged using the ECNS. However, 35,579 ECNS-eligible cases met secondary nurse triage criteria. The majority (83%) of the 2,728 calls were transferred to the ECNS between 8am and 4pm.

Conclusion: The data clearly demonstrated that, for both agencies, there are a significant volume of low acuity Medical Priority Dispatch System calls that are eligible for nurse triage which are not being triaged using the ECNS. Each agency should explore costs and benefits of staffing these secondary triage desks for longer hours, particularly between 8pm and 11pm to maximize the opportunity to triage low-acuity patients to more appropriate healthcare resources.

INTRODUCTION


Nurse advice lines and telephone nurse triage have become increasingly popular as medical crises have risen worldwide. Telephone triage nurses answer questions about common medical symptoms and problems and help callers determine whether a patient needs medical care—and if so, how soon, and what kind.¹ Many hospitals, medical practices, and insurance companies offer such services, in part to increase customer satisfaction and provide information during out-of-office hours, but also to reduce overuse, or inappropriate use, of expensive emergency and urgent care services.² This is particularly important as Emergency Department (ED) overcrowding and overuse continue to escalate.^{3,4} Therefore, an intervention that can alleviate this deteriorating situation would be a great asset in the delivery of effective and efficient emergency care at the ED.⁵

Although telephone advice lines are common, as are nurse triage services connected with emergency departments, telephone nurse triage at the 9-1-1



Co-Responders

- **Know them!**
 - Monthly meetings
- **Train you employees to show respect**
 - And recognize them for deeds
- **Support their projects**
- **Recognize exemplary service**
- **Be reliable**
- **Provide training**
 - ECA, specialty, joint

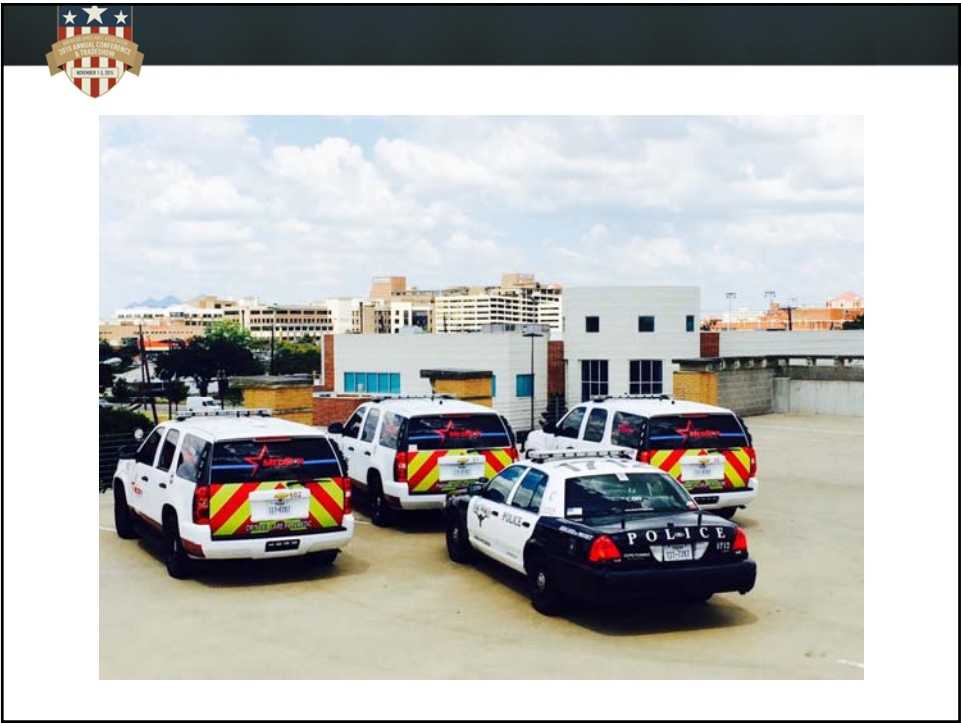
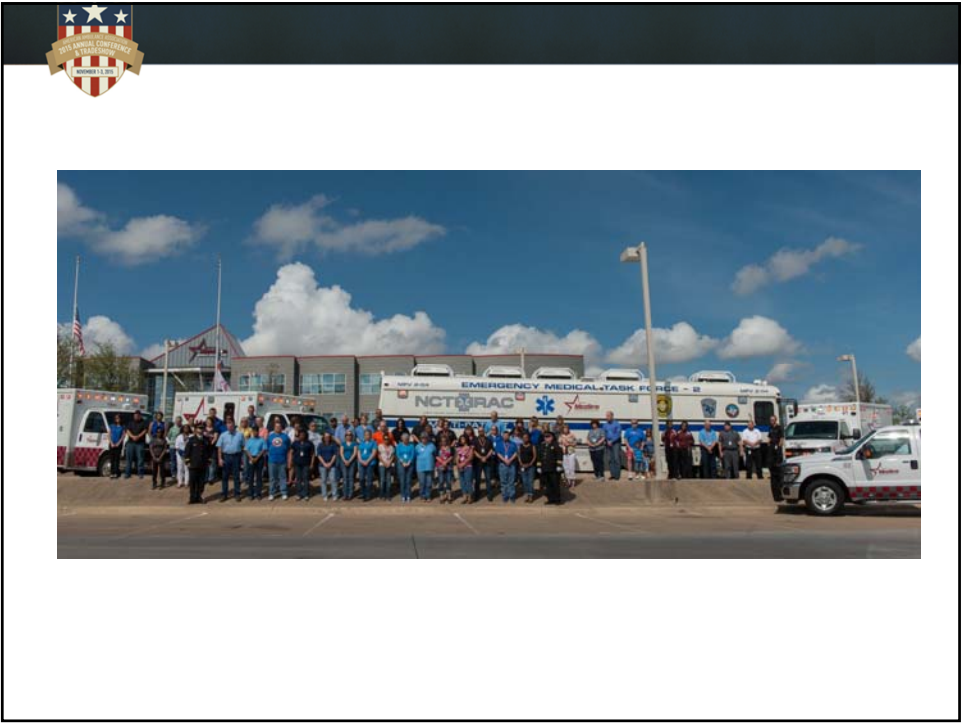


*Our
first
crew*

*Thank you for participating in our first
course at South Lake City, Utah. I don't think
we would have been able to do it without you, but
thanks very informative and kind to our crew.*

*It's difficult for you to see our community and
proud for the place you provide in
Burlison, we could not do it without you!*

*Thank you again. Be safe, be well, and bless
your hands and feet
Burlison Fire Dept*





From: Coble, David [mailto:David.Coble@fortworthtexas.gov]
 Sent: Saturday, September 26, 2015 9:35 AM
 To: Matt Zavadsky; Ware, Mark
 Subject: RE: FWFD Kudos

Will do, thanks

From: Matt Zavadsky <mzavadsky@medstar911.org>
 Date: 09/26/2015 9:33 AM (GMT-06:00)
 To: "Ware, Mark" <Mark.Ware@fortworthtexas.gov>, "Coble, David" <David.Coble@fortworthtexas.gov>
 Subject: Fwd: FWFD Kudos
 Cool!

Please pass along our thanks!!

Sent from my iPhone provided by MedStar Mobile Healthcare

From: TL Drake <tdrake@medstar911.org>
 Date: September 25, 2015 at 20:43:44 CDT
 To: Matt Zavadsky <mzavadsky@medstar911.org>, Christopher Cunningham <ccunningham@medstar911.org>
 Subject: FWFD Kudos

Run #150925405 was an MVA with multiple patients. Upon our arrival on scene, I got a very thorough and detailed report from the crew of E19. The FD officer was not only able to give me an accurate count and description of all patients, but was also very insistent that he and his crew would handle all the paperwork on all the patients that weren't being transported. He very pleasantly pointed out that it would be much easier for them than it would be for us.

The entire crew was extremely pleasant in demeanor and professionalism. I got the impression that this is their normal work attitude and ethic. THIS is the kind of selfless everyday excellence that we all very much appreciate, but needs to be recognized more often.



Allen Blakeman ► **Matt Zavadsky**

October 18 at 12:48pm · 👤

Matt

I wanted to thank you again for sending a crew out for Red Barton's funeral

Like

Comment



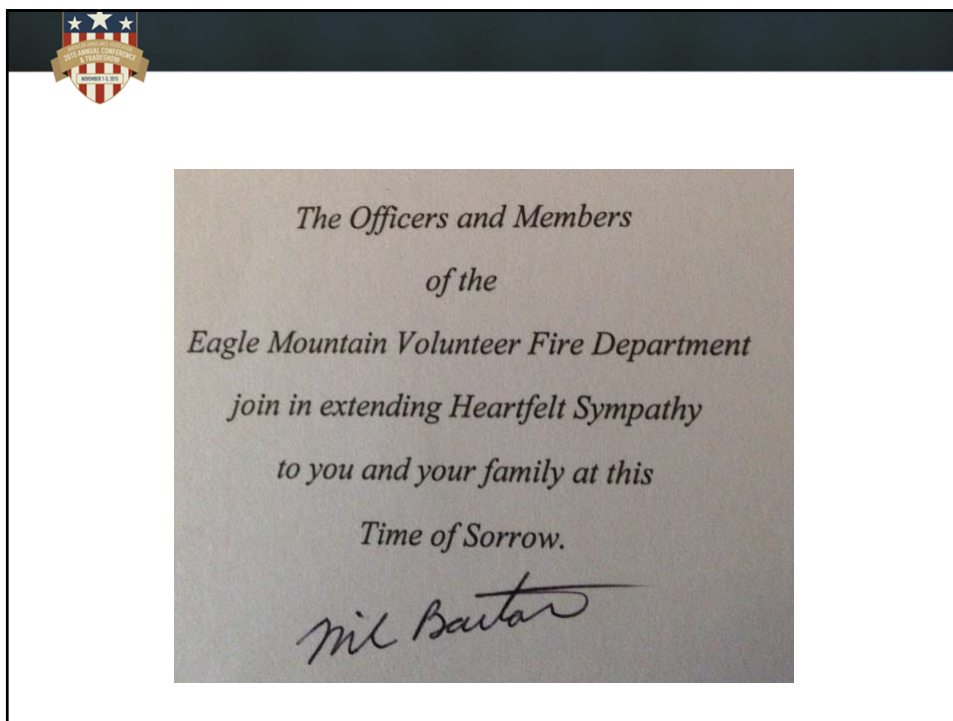
Matt Zavadsky Our honor Allen - thank you for allowing us to do this for you guys!

Like · Reply · October 19 at 10:58pm



Allen Blakeman Thank you. Let me know if we can do anything for you

Like · Reply · October 19 at 11:27pm




Community Influencers

- **Be there!**
- **Engage your workforce - Volunteerism**
 - Culturally competent
 - Ambassadors
- **“Leadership XX”**
- **“Safe Community” initiatives**
- **Chambers of Commerce**
 - And their committees
- **Co-Branding Initiatives w/Respected Non-Profits**
- **High value volunteering**
 - Code Blue/Citizens on Patrol
 - SkyWarn Weather Spotting
 - Patriot Guard
 - Fund raising groups (that happen to ride Harleys?)





The Media

- **Be available!**
- **Know them**
- **Know what they want/need**
- **Push information**
 - Newsworthy events
- **Recognize them for their efforts**
- **Be HONEST**
- **Train your staff to appreciate them & their needs**
 - Timely info
- **Write guest columns**



From: Manning, Allen W [mailto:AllenM@ktvt.com]
 Sent: **Monday, October 26, 2015 8:18 PM**
 To: Matt Zavadsky
 Subject: RE: anything to this one?

Must have been one of those tandem bikes – thanks!

-----Original Message-----

From: Matt Zavadsky [mailto:mzavadsky@medstar911.org]
 Sent: **Monday, October 26, 2015 7:41 PM**
 To: Manning, Allen W <AllenM@ktvt.com>
 Subject: RE: anything to this one?

2 patients, both GREEN.... 1 transported to JPS... The other was treated and referred on scene....


-----Original Message-----

From: Manning, Allen W [mailto:AllenM@ktvt.com]
 Sent: **Monday, October 26, 2015 7:35 PM**
 To: Matt Zavadsky
 Subject: anything to this one?

-----Original Message-----

From: CAD@MedStar911.org [mailto:CAD@MedStar911.org]
 Sent: **Monday, October 26, 2015 7:28 PM**
 To: @KTVT News Desk All <KTVTNewsDeskAll@cbs.com>
 Subject: CAD Page

NEWS: M51 auto bike Calmont/Cherry Mapsco 73M inc# 344-ray



From: Matt Zavadsky
 Sent: **Friday, October 23, 2015 4:45 AM**
 To: 'Smith, Stephanie (NBCUniversal)'
 Subject: RE: anything going on

Hi Stephanie – Nothing really major – just lots of minor crashes... We had one about 2:20a that may have been due to the water on 35SB at 28th street – we took 3 people to the hospital 2 with minor injuries, 1 with serious, but not life threatening injuries...


Thanks,
 Matt

From: Smith, Stephanie (NBCUniversal) [mailto:stephanie.smith@nbcuni.com]
 Sent: **Friday, October 23, 2015 4:37 AM**
 To: Matt Zavadsky
 Subject: anything going on

Good morning Matt,

How is everything going? Any weather related calls? Flooding or water rescues?

Stephanie Smith
 Assignment Editor
 NBC 5 / KXAS-TV | – Dallas-Fort Worth




Lauren Zakalik
 mentioned you.

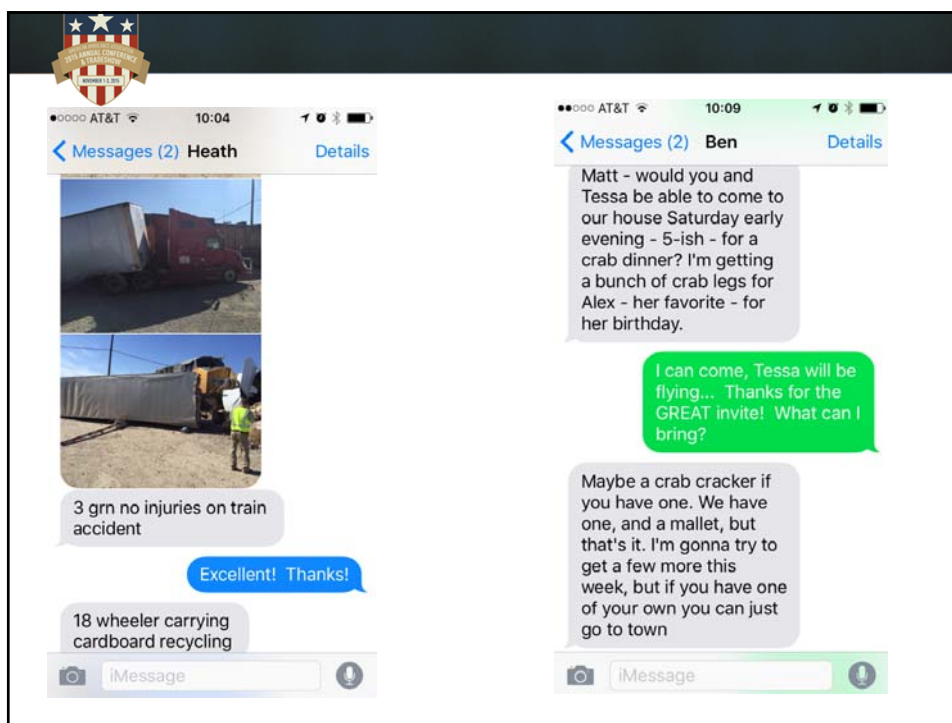
[Reply](#)

 **Lauren Zakalik**  Oct 31
 @wfaalauren

.@MedStarEMSInfo making #Halloween
 special for two deserving little girls. WATCH:

wfaa.com/story/news/loc...

   [View conversation](#)



28 | FOCUS HEALTH CARE

Health care innovation – the Fort Worth way

HEALTH CARE INNOVATION

The U.S. health care system is going through one of the most rapid changes in history. The same is true in Fort Worth, where a variety of health care providers are working to improve patient outcomes, improve the patient's experience of care and reduce costs.

In the meantime, this study led to a major change in the way that health care providers are working to improve patient outcomes, improve the patient's experience of care and reduce costs.

Emergency calls are the most common reason for a patient's visit to a hospital. In many cases, the patient is not in the best of health when they arrive at the hospital. This is often due to a lack of information about the patient's condition, or a lack of communication between the patient and the healthcare provider. This is often due to a lack of information about the patient's condition, or a lack of communication between the patient and the healthcare provider.

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30 | FOCUS HEALTH CARE

MedStar by the Numbers

MedStar by the Numbers

MedStar is a leading provider of healthcare services in Fort Worth. The organization has a long history of providing high-quality care to its patients. MedStar is a leading provider of healthcare services in Fort Worth. The organization has a long history of providing high-quality care to its patients.

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Words from the Experts...






Thank You for this Privilege!

Scan to request a
copy of the
presentation...

