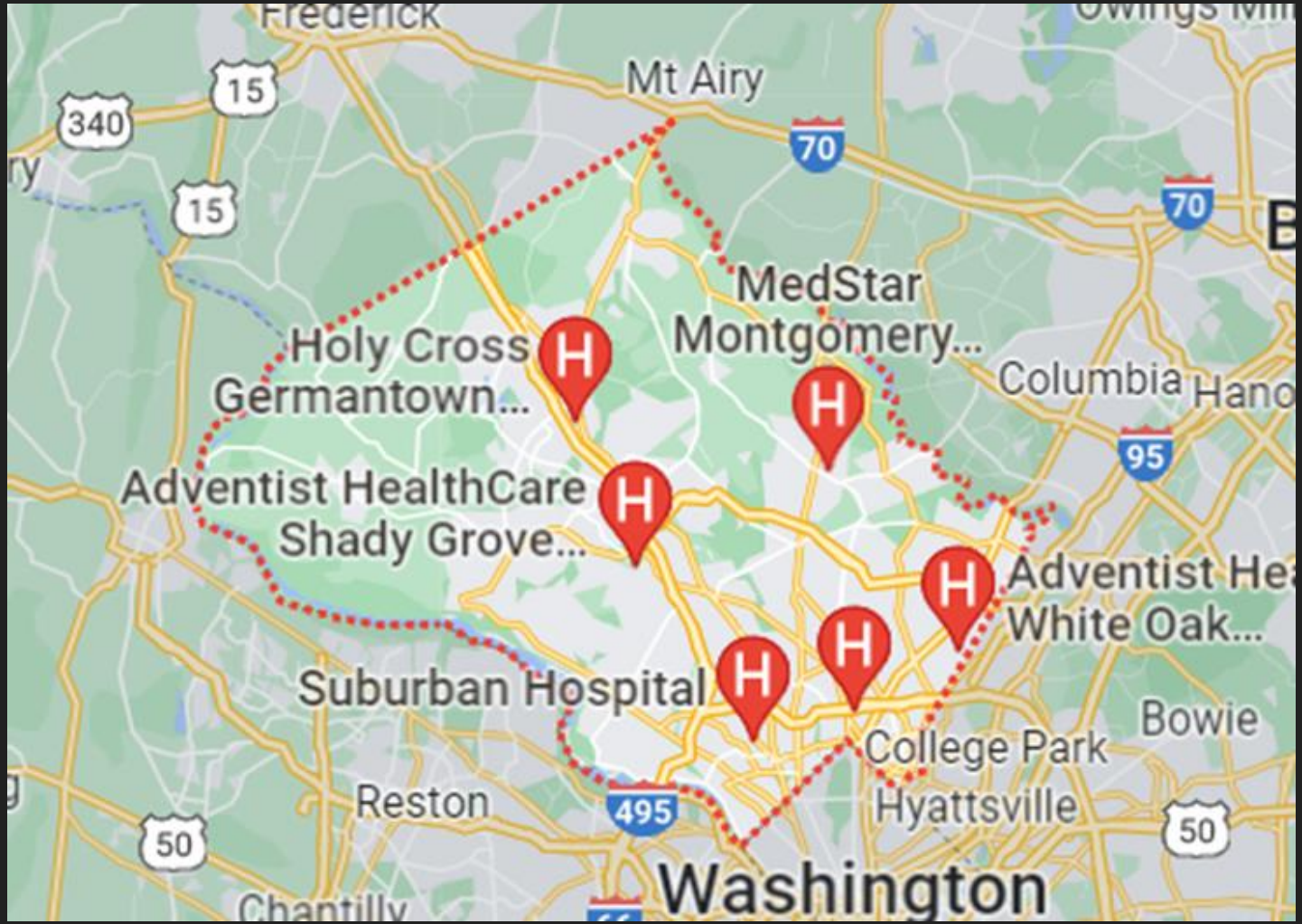
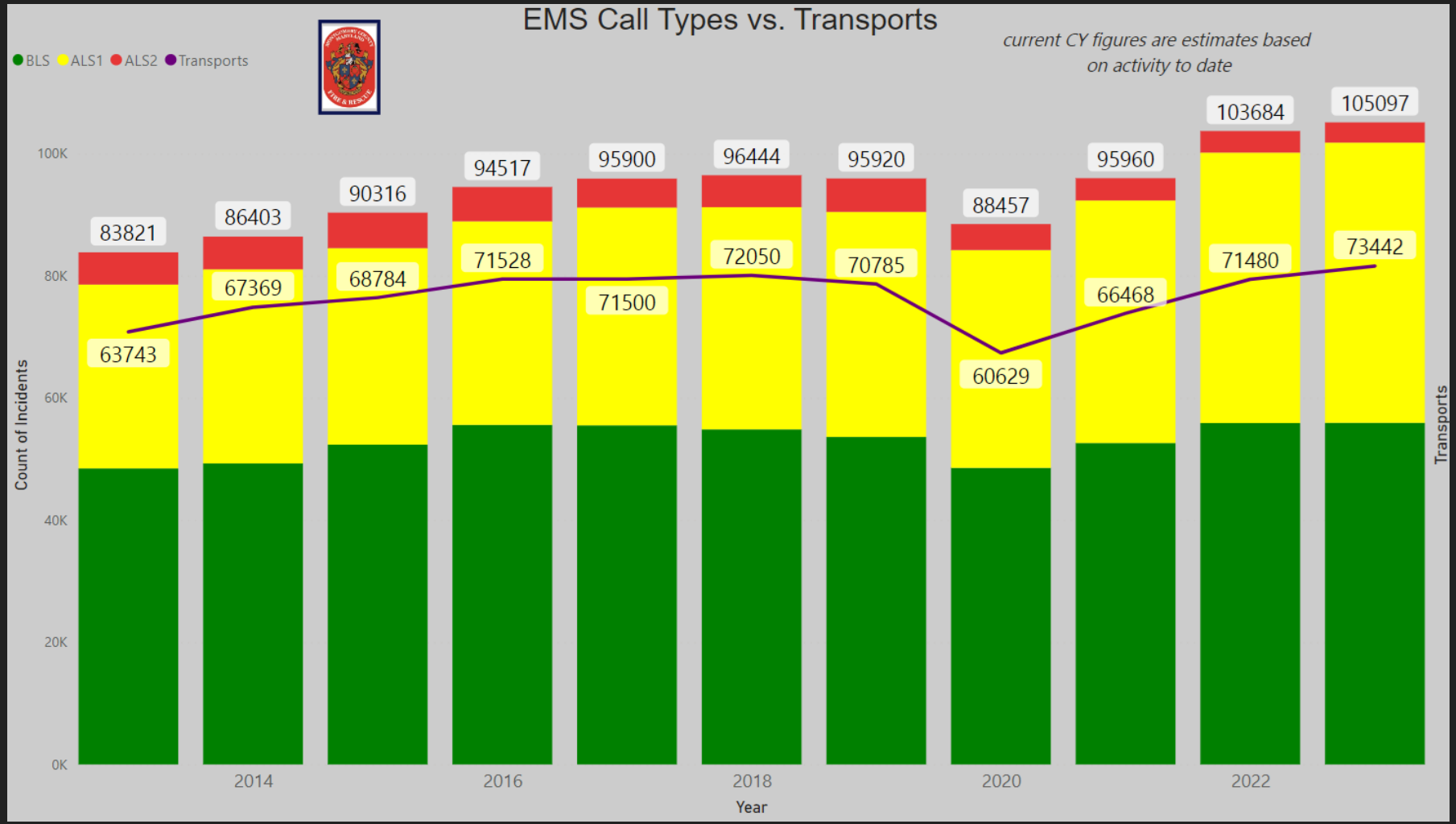
EMS Update

Summer 2023


Frederick
Mt Airy
340
15
15
70
70
MedStar
Montgomery...
Holy Cross
Germantown...
Columbia
Adventist HealthCare
Shady Grove...
95
Adventist He
White Oak...
Suburban Hospital
Bowie
College Park
Reston
Hyattsville
495
50
50
Washington
Chantilly


EMS Call Types vs. Transports
BLS ALS1 ALS2 Transports
current CY figures are estimates based on activity to date
100K
80K
60K
40K
20K
0K
Count of Incidents
Transports
Year
2014
2016
2018
2020
2022
83821
86403
90316
94517
95900
96444
95920
88457
95960
103684
105097
63743
67369
68784
71528
71500
72050
70785
60629
66468
71480
73442

Why I care

1. When the ED is full there is no place to move EMS patients. I need EMS units available to take care of the community.

1. There is no resilience. No slack. Every hospital is full and the ED is boarding admitted patients. They cannot keep up with the day to day. I fear for the true multiple casualty case.

Why we care about hospital bed delays

1. There is zero productivity when a unit is standing on a wall at an ED.
2. If unchecked, we will need more ambulances to meet community needs.

What I tell ED leadership

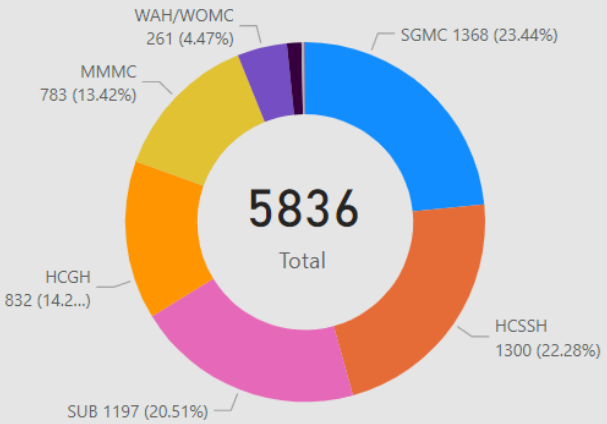
- We will not normalize extended wait times.
- EMS crews will not act as surrogates for ED staff.
- Send stable patients out to triage even if we don’t initiate.

MCFRS Hospital Interface Report

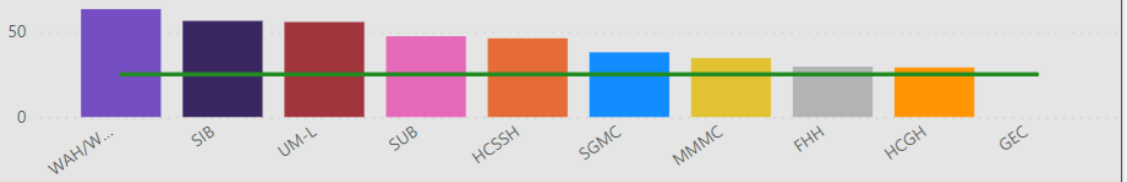
GEC | HCGH | HCSSH | MMMC | SGMC | SIB | SUB | WAH/WOMC

Month/Year
- 11/2022
- 10/2022
- 09/2022
- 08/2022

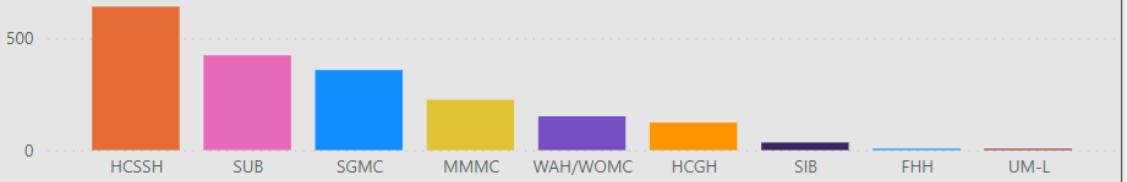
Patient Distribution



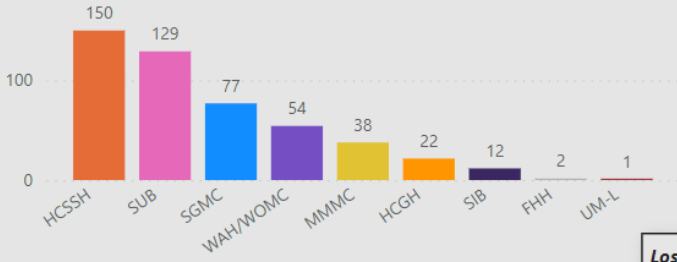
90PCTL Turnover Time (at hospital to off cot) in minutes (GOAL=25min)



Count of patient turnovers >25 min



Lost unit hours by hospital

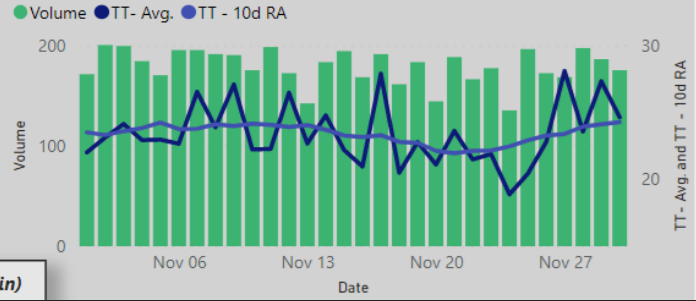


Unit productivity loss in dollars

$60,691.31

Countywide Lost Unit Hours	Lost units
483	0.69

Lost UH=Turnover Time - 25min (only when TT>25min)



What I think is happening

1. The ED is the best place to get a comprehensive workup
2. Poor access to primary care
3. The underinsured don’t take off work to see the doctor
4. Hospitals are full and they are efficient - whether forced or self-imposed - and there is no room.

EDs have a gap-filling role for flaws in other levels of the healthcare system, being one of the only health care resources always available to individuals in need.

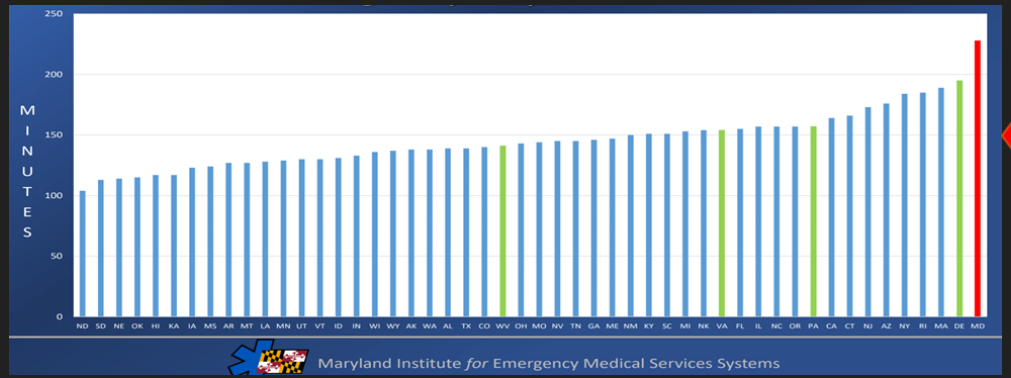
https://journals.sagepub.com/doi/full/10.1177/0020731417734498

Maryland's Global Budget Model

Well intentioned payer model that provides fixed hospital reimbursement

When hospitals are full the ED gets backed up

Maryland is last for ED wait times (CMS data 1/7/20-3/31/21)



42. California: 164 minutes
43. Connecticut: 166 minutes
44. New Jersey: 173 minutes
45. Arizona: 176 minutes
46. New York: 184 minutes
47. Rhode Island: 185 minutes
48. Massachusetts: 189 minutes
49. Delaware: 195 minutes
50. Maryland: 228 minutes

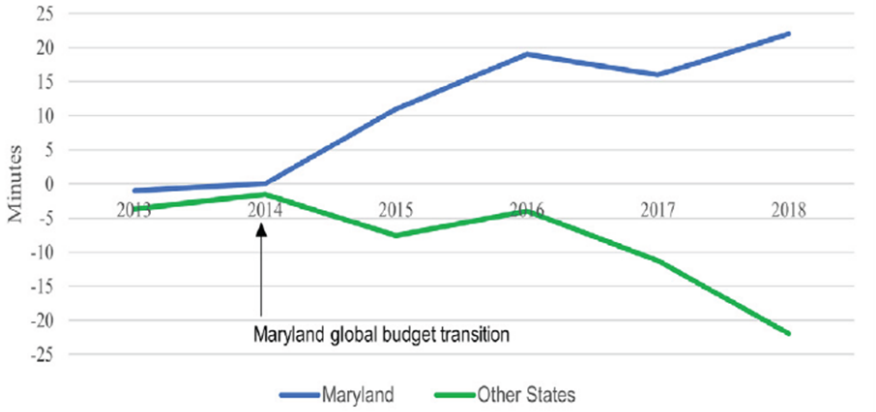


Figure 1. Cumulative absolute change in time from emergency department (ED) arrival to ED departure for admitted ED patients since 2013.
Note. Emergency department boarding was 367 minutes in Maryland and 295 minutes in all other states, in 2012. Source: Hospital Compare.[9]

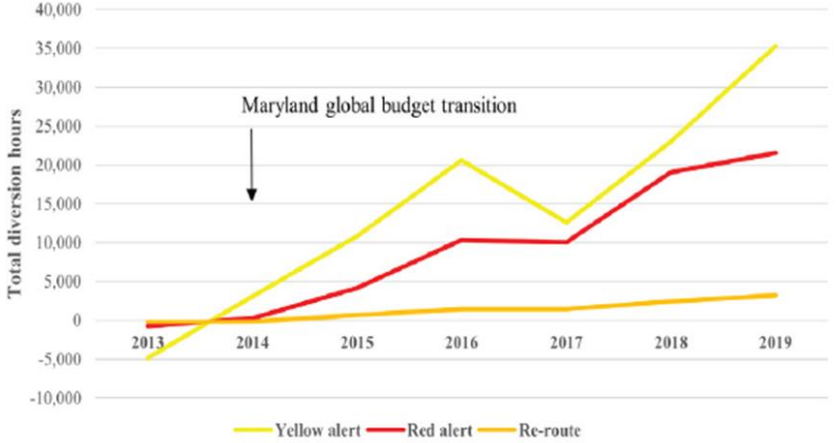


Figure 2. Cumulative absolute change in ambulance diversion time by diversion type in Maryland since 2013.
Note. Diversion hours were yellow alert =17,377, red alert = 7648, and re-route = 1396 in 2012.
Source: Maryland Institute for Emergency Medical Services Systems.[13]

Balancing Efficiency and Access: Discouraging Emergency Department Boarding in a Global Budget System

Author(s): Stryckman, Benoit; Kuhn, Diane; Gingold, Daniel B.; Fischer, Kyle R.; Gatz, J. David; Schenkel, Stephen M.; Browne, Brian J.

What I think is happening

1. Any plan to defer ED patients to urgent cares is flawed.
2. UCs are for profit companies who can turn people away. They have limited hours and limited capabilities.
3. This is healthcare problem. Not an ED problem.
4. Hospitals I work with are at capacity. They openly blame their capacity problems to cost restriction imposed by HSCRC. Imposing fines for ED throughput while also throttling their ability to admit is unwinnable.

Prince George's County takes action to improve excessive ER wait times

By Sierra Fox | **Published** July 18, 2023 12:49AM | Prince George's County | FOX 5 DC |

Prince George's County ramps up efforts to improve ER wait times

Alarming research reveals Maryland has the longest emergency room wait times in the entire country. FOX 5's Sierra Fox reports on what's being done to fix the issue.

Opportunities

1. Rebalance the money.

1. Expand FSEDs. EMS and the public are pretty good at getting this right.

Time is too short. Our focus should be on orienting to the complexity of the problem, preparing a report with a framework of recommendations based on what we see in our site visits.