The Future of Emergency Healthcare Services

We appreciate those professional leaders in our County for sharing their information and views on the following subject. Knowing that many of the recommendations of the Institute of Medicine report have been met should be a comfort to all within our County service area.

The ad hoc Medical Review Committee submits this summary report as a completion of its charge from Walter Rohrer, Chairman, St. Johns County Civic Roundtable. During the process of review of the Patient Centered Care Network the Chair asked the Committee members to explore what effort might be taken cooperatively between the Departments of Fire-Rescue and the County Department of Health and Human Services.

The Chair met with Chief Robert Hall and Director Maria Colavito, DHHS. In planning prior to that meeting some research was done and the June 2006 National Institute of Medicine report titled “The Future of Emergency Care Services” was found. Later telephone discussions with Chief Hall and a Roundtable presentation by Dr. Colavito and staff presented a statistical overview of St. Johns County health data. In addition to get a broader view of County resources and planning a Committee meeting was held with Mr. Ray Ashton, St. Johns County Emergency Management. Also, a meeting was held with George Woodward, Medical Director, Fire-Rescue.

This will provide an overview of how well St. Johns County emergency care services meets the recommendations outlined in the ECS report. The following, in italics, are the IOM findings. (www.Iom.edu)

Many ED’s (Emergency Departments) are over crowded.

Flagler Hospital has recently remodeled and redesigned its intake process separating those who come to the hospital for medical care as opposed to those seeking emergency care services. This is the only hospital emergency care department in St. Johns County. It should be noted that a regional disaster plan is reported to be in place for co
ordination with the surrounding hospital facilities in adjacent counties. It is our understanding that currently the Flagler Hospital Facilities are adequate.

Neither Boarding (keeping intake patients waiting in the emergency department for up to two days), nor Diversion (sending emergency care patient’s to another emergency facility) is the practice at Flagler according to Chief Hall, Fire – Rescue.

When necessary Fire-Rescue will arrange transport to the most appropriate emergency care facility. For example, air transport may be necessary to Shands Hospital or another appropriate facility.

*Emergency Care is highly fragmented.*

In St. Johns County Fire-Rescue is the countywide emergency care service. After moving from an all-volunteer fire department several years ago and combing with Emergency Medical Services the Department currently is reported to have approximately 268 +/- employees and 17 Fire-Rescue stations located strategically throughout the County. The Fire – Rescue personnel are listed as 71 EMS, 181 Fire and 16 Communication. There is overlapping of roles in the EMS-Fire Rescue positions. Budget funding may come from the County General Fund and/or District.

Sheriff and Fire-Rescue departments do have a common radio frequency that allows for coordinated services. In addition an Emergency Operation Communication Center for disaster / crisis intervention is available to meet the need for radio communications across the frequency spectrum. This is a mobile trailer available in the event of a crisis event. Thirteen of these EOCC are positioned strategically statewide to provide needed communication ties.

New personnel hires for Fire-Rescue must be duel certified as firemen and paramedical. The Department encourages through in-service training its employees to maintain currency and upgrade skills related to the requirements associated with these certifications.
Critical Specialists are often unavailable to provide emergency and trauma care.

We do not believe this is a County problem at this time. It should be noted that the County does not have a designated trauma center. For the northeast coastal sector Shands Jacksonville is the designated trauma center. As the area grows, with the population doubling in approximately twenty years this may need to be considered.

The national report indicated that medical specialists frequently were not available in their findings due to many persons needing emergency care had no insurance and frequently were found not paying for services. Secondly specialist physicians have increased liability in emergency situations when the patient is unknown. Further emergency care needed maybe at an untimely occurrence when the specialist has completed a full day of work.

The availability of medical specialist, in emergency situations, is reported to be a problem in other parts of Florida, but is not viewed as a problem for St. Johns County.

EMS and EDs are not well equipped to handle pediatric care.

The St. Johns County Fire Rescue Medical Director is a very experienced professional in emergency care services. An experienced emergency practitioner he also teaches emergency care services and provides oversight to emergency health care provided by Fire-Rescue personnel. The Director is also on the teaching staff of First Coast Technical Institute. He is available for consultation to staff and coordinates with the Departments Chief of Training to assure currency of employee skill levels.

Fire-Rescue staff is provided with training, equipment and instruments for guiding proper medications are given in crisis situations. This includes pediatric emergency care prior to arriving at an emergency department (hospital facility).

The Medical Director provides a valuable service in the development of coordinated service opportunities with other teaching institutions and related service organizations.
The Medical Director noted that with the demographics changing in the County population more events (emergency calls) are centering on cardio-vascular incidents and service staff are being given training acknowledging the ECS experiences.

Nationally the Iom report indicates 27 % of the EMS events are pediatric patients. Many communities according to the report have yet to address the need of EMS care prior to entering the Emergency Department.

Other Comments:

The State has a Emergency Control Management Center in Tallahassee that is capable of managing overall state crisis management and intervention.

One of the recommendations of the IOM report was to place EMS services under the County DHHS. It is our opinion that coordination of EMS and DHHS can be best achieved through a carefully developed cooperative agreement with an annual accountability reporting objectives built in to it. Such reports should have a assessment of effectiveness against the stated objectives and annual up dating with copies available for administrative review with joint recommendations, as needed.

It is recommended that all Fire-Rescue Stations should have full back up emergency power capability. Currently approximately one half of the stations meet that standard. A report from Chief Hall estimates an investment of an estimated $ 200,000 would achieve this standard. Approximately on half of the current stations only have minimum emergency power capacity, i.e. keeping the lights on and minimal operations.

The need for further expansion of coordinated communication system is a divided opinion. A proposed 12-15 million system above and beyond the current in place capabilities is contested. We take no position on this until further information is available.
In summary, from the above interviews and other information collected it is the Committees belief that St. Johns County is a step above most other localities throughout the State in meeting the National Institute of Medicines recommendations.

Medical Review Committee:
Henry C. Warner, Chair
Linda Oakley, Member
Ken Bryan, Member
Barrie Higgins, Member