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MORE Mandates Sub-Committee
February 28, 2014
1PM, Legislative Office Building Room 1B

EMS PSA Task Force Final Report Recommendations #1-4

Thank you for the opportunity to offer testimony regarding the Connecticut Emergency Medical Services Primary Service Area Task Force Final Report.

I served as the Co-Chair of the EMS PSA Task Force and am the Director of Fire and Rescue Services for the Town of Farmington. I have been the Director in Farmington for 11 years and have worked in that town for the past 17 years. I have been active in Emergency Medical Services in Connecticut for 22 years, both volunteering and working in the communities of Bloomfield, West Haven, Colchester, and Farmington. I am a certified Emergency Medical Technician and Emergency Medical Services Instructor.

If implemented, the 5 recommendations offered in the EMS PSA Task Force Final Report would literally be the most significant progress that Connecticut's EMS System has seen in my lifetime. The PSA System is almost 40 years old. It needs to be updated to incorporate the elements of best practice, transparency and home rule; all of which are good public policy.

Recommendations #1 through 4 in the EMS PSA Task Force Final Report are basic common sense. They should have been implemented many years ago. These recommendations have the unanimous support of the entire Task Force and the EMS agencies that they represent. The implementation of these recommendations during this legislative session is a home run for the State Legislature.

EMS PSA Task Force Final Report Recommendations #5

Recommendation #5 is the Alternative Provision of PSA Responsibilities. This recommendation simply states that municipalities shall have the right to submit a Local EMS Plan for consideration to DPH for the alternative provision of primary service area responder responsibilities.

Recommendation #5 does not offer any guarantees of a change of EMS provider, it simply offers a municipality, which believes that their community can better served by a different EMS provider, the opportunity to have their specific case heard by DPH.

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Recommendation #5 takes into account all of the arguments against PSA reform that have been made by the commercial ambulance services. Recommendation #5 requires DPH to schedule a formal hearing, notice all of the parties having interest in the matter, and to hear testimony on the very concerns that the commercial ambulance services have brought forward. These issues include the impact on patient care, the Local EMS Plan, EMS System sustainability, impact on the local, regional and statewide EMS System, and recommendations from Medical Control / Sponsor Hospital.

Recommendation #5 gives DPH the authority to hear all of the facts of a particular situation, to evaluate them on their merits, and to determine who is positioned to offer the best patient care in a community going forward. In effect, this is perhaps the most important element of the recommendations. It brings the system into alignment with other modern delivery systems which provide an opportunity for full due diligence, evaluation and quality assessment. Modern healthcare medical systems encourage evaluation and provide the opportunity for change when the provider or system is not aligned.

The PSA Task Force truly saved the best for last. Recommendations 1 through 4 will all improve the EMS Delivery System in Connecticut, but Recommendation #5 speaks to the very issues that drove hundreds of Connecticut's Fire, Police, EMS and other municipal personnel to come to the Hartford last year, to testify at public hearings, and / or to reach out to their legislators. This has been a highly motivated group of participants all of who have responsibilities in their own municipalities. These are the people on the ground floor.

The Task Force was given 5 specific charges. 2 of the 5 charges of the Task Force relate directly to Recommendation #5. This equates to almost half of the very reason the Task Force was seated.

Recommendation #5 is Critical for Municipalities

Please do not be surprised that Recommendation #5 did not win the endorsement of the commercial ambulance services. The existing statutes and regulations do not include specific performance measures for EMS providers. There are no established required response times. A provider simply has to show up in order to meet their obligation as a Primary Service Area Responder. The important takeaway is that municipalities are directly responsible to their citizens to provide the highest quality care through the best delivery system. The existing system is an obstacle to this goal in that it has established artificial protection for providers who don't necessarily have a vested interest. Municipalities serve the needs of their resident before, during and after emergencies. The buck always starts and stops at the local level.

Imagine for a moment, that you have been doing the same job for the past 40 years. In order to keep your job, all you need to do is consistently show up for work. And when I say show up for work, I mean just that, show up. You are not even required to report to work at a certain time.

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Now, imagine for a moment, that after 40 years of doing this job, you were asked to vote on whether you'd like to start having performance evaluations that could be tied to the future of your employment. That performance evaluation is the equivalent of the hearing that Recommendation #5 would permit in front of DPH. Suddenly, your performance, competitiveness, and service delivery could be directly compared to other providers, adding a new layer of transparency and quality control. Effective and efficient systems have adequate and appropriate checks and balances in place. Further, these same systems create financial incentives to ensure the highest quality.

The fact that Recommendation #5 doesn't have the unanimous endorsement of the entire Task Force should not cause you any hesitation. The fact that Recommendation #5 does not have the unanimous endorsement of the entire Task Force should be the very reason that you endorse it, thus allowing municipalities the opportunity to have their concerns appropriately addressed by DPH.

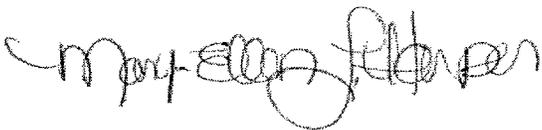
Relevancy of Recommendation #5 to the MORE Commission

Recommendation #5 should be a priority of the MORE Commission as it speaks to the very heart of the mission of the MORE Commission. The current system removes the right of a municipality to consider regional or other cooperative options for the delivery of EMS in their community that can enhance the service in a community or allow for it to be provided more efficiently. Recommendation #5 creates an avenue for municipalities to consider those options.

Conclusion

Primary Service Area Responders have enjoyed almost 40 years of having the right to be the exclusive provider of EMS in their designated geographic areas within the State of Connecticut. The current PSA System allows these providers to continue to profit from this privilege indefinitely, provided they meet only the minimum requirements. It is not unexpected that these Primary Service Area Providers would support the status quo so that they can indefinitely reap the benefits of this designation without concern for having to improve their service delivery or otherwise react to the dynamic needs of the community that they are designated to serve. The current PSA system is essentially a monopoly. Monopolies are not good government.

Respectfully Submitted,



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