



**EMERGENCY HEALTH  
SERVICES FEDERATION**  
YOUR COMMUNITY. OUR COMMITMENT.

# EMERGENCY HEALTH SERVICES FEDERATION ANNUAL REPORT

FISCAL YEAR 2021-22

## Authority

In accordance with the Pennsylvania Department of Health Rules and Regulations 28 Pa. Code § 1021.103, The regional council governing body shall submit an annual report to the Department.

Reporting requirements of Appendix A – Work Statement. Comprehensive Annual Report as related to, Coordinate and Improve the delivery of EMS in the Council's region.

Report is due within 30 calendar days of the end of each state fiscal year (June 30th)

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13 July 2022

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## REGIONAL SUMMARY:

Emergency Health Services Federation, Inc. is incorporated as Non-Profit Corporation by the PA Department of State since March 29, 1973. Our assigned area of responsibility is considered Southcentral PA and includes:

COUNTY	Population (2019 est)
Adams	102,811
Cumberland	251,423
Dauphin	277,097
Franklin	154,835
Lancaster	543,557
Lebanon	141,314
Perry	46,139
York	448,273

<http://worldpopulationreview.com/us-counties/pa/>

The Southcentral Pennsylvania region is diverse in that a large portion of the geography is rural but also contains pockets of urban areas including York, Lancaster, and Harrisburg. Divided by the Susquehanna River, running north and south, and the Pennsylvania turnpike, east and west, the region is bordered on the south by Maryland. Also located in this region are the State Government office buildings, Hersheypark, two nuclear power plants, and several military installations.

Our organization is driven by vast stakeholder input from EMS providers, county EMS councils, and 268 volunteers serving on our numerous committees, which provide system recommendations to our Board of Directors.

Our Board of Directors include a retired health system director, physicians, attorneys, county public safety answering point manager, nurse manager, volunteer basic life support provider, advanced life support chief, chief operating officer of a federally qualified health center, and a county emergency management agency director resulting in consistent, professional leadership.





**Financial Statement of income and expenses:**

	<b>Final Budget</b>	<b>Expended</b>
Personnel Services	\$769,625.23	\$767,700.05
Consultant Services	\$15,000.00	\$15,000.00
Subcontracted Services	\$105,409.44	\$105,409.44
Patient Services	\$0.00	\$0.00
Equipment	\$00.00	\$0.00
Supplies	\$25,508.00.00	\$25,309.47
Travel	\$3,058.71	\$2,520.19
Other Costs	\$537,094.81	\$532,694.80
<b>TOTALS</b>	<b>\$1,455,696.19</b>	<b>\$1,448,633.95</b>

**NOTE:** THE AMOUNTS SHOWN ABOVE ARE PRELIMINARY END OF YEAR TOTALS AND NOT FINAL AUDIT AMOUNT

**Special Project Funding:**

Projects as determined by the Department to be appropriate and necessary for the implementation of a comprehensive statewide EMS system. The amounts listed below are included in the categorical totals shown above.

<b>Emergency Preparedness Coordinator</b>	Amount: \$108,000.00
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*Project Narrative:*

Includes Salary, Fringe Benefits, and Vehicle Maintenance for Prime Movers

<b>Rural Education Funding</b>	Amount: \$505,793.81
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*Project Narrative:*

Act 93 of 2020, directs the Department of Health to allocate 30% of the EMS allocation to the Emergency Medical Services Operating Fund to provide training to underserved rural areas of the commonwealth. The primary objectives of this program shall be to improve access to current educational activities, create more educational opportunities, and to provide those opportunities at a lower cost to students and providers. These funds will be disbursed to the Pennsylvania Regional EMS Councils. Regional EMS Councils shall utilize the following list of approved expenditures and categories, in expending funds earmarked for rural education.

**Regional Activities/ Organizational Management**

Date of the current Comprehensive Regional EMS System Plan	Date 2021-03
Number of Board of Director Meetings \ Health Council meetings	9
Public Education Stop-the- Bleed Events	7

Public Education CPR Events	0
Number of Legislative Inquiries or Contacts	61
Technical Assistance Request (local entities and elected officials)	Appendix A

*Regional Activities/ Organizational Management Project Narrative:*

The EHSF continues to coordinate the regional ePCR initiative with ESO Solutions. Every EMS agency in the region is welcome to use the ePCR system through ESO. Currently, 87% of the transporting EMS agencies in the region use ESO.

The EHSF continues to coordinate an initiative to provide emergency department’s operating status communications to EMS providers and PSAPs. PA Medic went live Q1 of 2022. All hospitals within the EHSF region are using the system. There are several additional hospitals across the Commonwealth using the system as well. The EHSF will continue to expand on the system’s capabilities.

The EHSF continues to meet with its mental health working group to focus on enhancing the quality of care of mental health patients and EMS provider mental health.

The EHSF continues to meet with its IALS working group to strategize the best deployment of IALS assets throughout the region. Currently, four of the eight counties are utilizing the IALS deployment model for the region.

The EHSF worked with EMS agencies and PSAPs to determine alternate dispatching plans. Currently, three of the eight counties are utilizing an alternate dispatching plan for low acuity patients.

The EHSF continues to provide support during the COVID-19 pandemic.

The EHSF developed a rural EMS education model for EMR and EMT level of certification.

Coordinated EMD courses for the eight PSAPs within the region.

Presented awards at numerous commendation award ceremonies.

**Continuous Quality Improvement**

	Quantity
Number of Clinical Cases Reviewed by Regional QI Committee	(trending only)

Accidents Involving Ambulances / EMS Personnel Reported in the Region	13
Number of Times the Regional QI Committee Met	4

*Continuous Quality Improvement Narrative:*

The EHSF facilitated quality improvements efforts through the Regional Quality Improvement Committee. The Committee reviewed data regarding stroke, STEMI, and opioid overdoses.

**Medical Direction**

	Quantity
Regional Medical Advisory Committee meetings	4
Accredited Level I Trauma Centers	2
Accredited Level II Trauma Centers	2
Accredited Level III Trauma Centers	0
Accredited Level IV Trauma Centers	0
Accredited primary Stroke Centers	14
Comprehensive Stroke Centers	2
Thrombectomy Capable Stroke Centers	0
Acute Stroke-Ready Hospitals	0

*Medical Direction Narrative:*

The EHSF Regional Medical Director continued to provide medical oversight for the eight public safety answer points, which each utilize Emergency Medical Dispatching. He also provided oversight for the IALS system response model and alternate dispatching plans.

**Systems Operations**

	Quantity
Spot inspections conducted – EMS Agencies	0
Spot inspections conducted – EMS Vehicles	0
Spot inspections conducted – Continuing Education Sponsors	0
Spot inspections conducted – Education Institutes	0
Spot inspections conducted – Medical Command Facilities	0



Number of Safety Inspections Conducted	0
Number of Vehicles Inspected During Safety Inspection	0
Photo & Signatures Added to Certification Cards	unknown
BLS Psychomotor Examinations Conducted	49
Number of BLS Psychomotor Exam Candidates Tested.	104
ALS Psychomotor Examinations Conducted	5
Number of ALS Psychomotor Exam Candidates Tested	54
Certification Class Visits Conducted	0
Number of EMS Agency Re-Inspections Conducted	47
Number of Authorized Inquiry Reports Filed with the Bureau	0

*Systems Operations Narrative:*

Continued to use the psychomotor contingency plan for testing of certification candidates.

**Emergency Preparedness Activities**

	Quantity
Coalition / Task Force Meetings Attended (only EMSOF funded staff attendance)	18
Tabletop Exercises Attended / Conducted	0
Full Scale / Functional Exercises Attended / Conducted	2
Special Event Plans Submitted	0
Responses / Deployments	0
Strike Team Agencies	12

Emergency Preparedness Narrative:

Supported a search and rescue mission (Cub Cadet and radio cache)  
 Supported vaccination sites as necessary (staff, red trailer and Cub Cadet)  
 Supported large scale events (radio cache)  
 Maintained a level of situational awareness and briefed DOH leadership as well as EHSF leadership as necessary

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Added Knowledge Center / Corvena users  
Provided virtual introductions and networking opportunities as possible

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**Board of Director \ Health Council Meetings**

DATE:	TIME	LOCATION
08/18/2021	1830	Virtual – Zoom
11/17/2021	1830	Virtual – Zoom
02/16/2022	1830	Virtual – Zoom
04/20/2022	1830	Virtual – Zoom
05/11/2022	1830	Virtual – Zoom

**Medical Advisory Committee Meeting**

DATE:	TIME	LOCATION
09/09/2021	0930	Virtual – GoToMeeting
11/04/2021	0930	Virtual – GoToMeeting
02/03/2022	0930	Virtual – Zoom
05/05/2022	0930	Virtual – Zoom

**Quality Improvement Committee Meeting**

DATE:	TIME	LOCATION
07/22/2021	1000	Virtual – GoToMeeting
10/28/2021	1000	Virtual – GoToMeeting
01/27/2022	1000	Virtual – Zoom
04/28/2022	1000	Virtual – Zoom

**Prehospital Operations Committee**

DATE:	TIME	LOCATION
09/16/2021	1000	Virtual – GoToMeeting
11/11/2021	1000	Virtual – GoToMeeting
01/13/2022	1000	Virtual – Zoom
03/10/2022	1000	Virtual – Zoom
05/12/2022	1000	Virtual – Zoom

**Education Committee**

DATE:	TIME	LOCATION
09/14/2021	1000	Virtual – GoToMeeting
12/14/2021	1000	Virtual – GoToMeeting

03/08/2022	1000	Virtual – Zoom
06/14/2022	1000	Virtual – Zoom

**Regional Communication Committee**

DATE:	TIME	LOCATION
08/27/2021	1000	Virtual – GoToMeeting
11/05/2021	1000	Virtual – GoToMeeting
02/04/2022	1000	Virtual – Zoom
05/06/2022	1000	Virtual – Zoom

**Regional Accomplishments:**

Increased education opportunities for EMS certification in rural EMS areas. The EHSF partnered with an established educational institute to offer an AEMT certification class with student tuition covered for commitment to volunteer/work for a rural EMS agency in Perry County. The intent is to increase IALS providers in the county to assist with building their IALS response system.

The EHSF partnered with Avive Solutions to develop a 4-Minute City in Cumberland County. The project has been a year of planning to bring high tech, connected AEDs into the county to improve cardiac arrest response. AEDs will launch in Q4 of 2022. The EHSF started partnering with three additional counties in the region to become 4-Minute Cities in 2023.

Supported the SCTF Health and Safety Conference.

Initiated development of a mobile education/training resource.