

# EMERGENCY HEALTH SERVICES FEDERATION ANNUAL REPORT

FISCAL YEAR 2024-25

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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#### **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 (2023 est)
Adams	106,748
Cumberland	270,738
Dauphin	289,234
Franklin	157,854
Lancaster	558,589
Lebanon	144,252
Perry	46,083
York	464,640

(https://www.census.gov/)

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.

# **Board of Directors \ Health Council Officers**

Pre	sident:	Maureen D. Gallo			
Vice President: Robert G. Shipp III					
Treasurer: Timothy W. Baldwin					
Sec	retary:	William Little			
(Plea	ase list all oth	ner members below)			
		NAME		NAME	
1	Warren P. I	Bladen	19		
2	John R. Log	gan	20		
3	Steven L. P	offenberger	21		
4	Michael J. 1	Reihart, DO, FACEP, FAEMS	22		
5	Steven K. S	Schirk, MD, FACEP	23		
6			24		_
7			25		
8			26		
9			27		
10			28		
11			29		
12	-		30		
13			31		
14			32		
15			33		
16			34		
17			35		
18			36		
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# **Regional EMS Council Staff:**

Executive Director	C. Steven Lyle
CTAFE DOCUTION	NAME
STAFF POSITION	NAME
Director of Administrative Services	Catherine M. Spangler
Deputy Director	Megan A. Ruby
Administrative Services Coordinator	Amy Mitchell
Emergency Preparedness Coordinator	Thomas H. Alsted
System Specialist	Allyson J. Cutaiar
Operations Coordinator	Kevin P. Piersol
Project Coordinator	Ian M. Donat
Program Manager	Debra A. Fleagle
Program Coordinator	Juana B. Summers
Program Coordinator	Kimberly E. Herskowitz

# **Regional Medical Director(s)**

Michael J. Reihart, DO, FACEP, FAEMS

#### **Financial Statement of income and expenses:**

	Final Budget	Expended
Personnel Services	1,019,492.34	1,012,817.93
Consultant Services	15,000.00	15,000.00
Subcontracted Services	114,130.41	114,130.41
Patient Services	0.00	0.00
Equipment	0.00	0.00
Supplies	21,800.00	21,000.37
Travel	6,800.00	6,034.92
Other Costs	767,882.19	756,634.67
TOTALS	1,945,104.94	1,925,618.30

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.

Emergency Preparedness Coordinator	\$116,126.00
Project Narrative:	
Includes Salary, Fringe Benefits, and General Travel for Prime Movers	
Rural Education Funding	Amount: \$560,762.99

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	
Number of Board of Director Meetings \ Health Council meetings	9
Public Education Stop-the- Bleed Events	2
Public Education CPR Events	4
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 PCR initiative with ESO Solutions. Every EMS agency in the region is welcome to use the PCR system through ESO. Currently, 92% 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, all the eight counties are utilizing the IALS deployment model for the region. The EHSF assisted EMS agencies and PSAPs outside of the region to develop an IALS dispatch model.

The EHSF continued to work 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 continued to deploy the rural EMS education model for EMR and EMT level of certification. The EHSF began to obtain resources to build the mobile simulation unit to provide mobile continuing education throughout the region.

The EHSF coordinated EMD courses for the eight PSAPs within the region.

The EHSF delivered multiple sessions of the Compassionate Overdose Response Education (CORE) to address substance use disorder stigma in York County. The EHSF distributed naloxone leave behind kits with this project.

### **Continuous Quality Improvement**

	Quantity
Number of Clinical Cases Reviewed by Regional QI Committee	(trending only)
Accidents Involving Ambulances / EMS Personnel Reported in the Region	1
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 1	
Comprehensive Stroke Centers 2	
Thrombectomy Capable Stroke Centers	
Acute Stroke-Ready Hospitals	

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	2
Spot inspections conducted – EMS Vehicles	5
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	4
Number of Vehicles Inspected During Safety Inspection	11
Photo & Signatures Added to Certification Cards	unknown
BLS Psychomotor Examinations Conducted	63
Number of BLS Psychomotor Exam Candidates Tested.	793
ALS Psychomotor Examinations Conducted	0
Number of ALS Psychomotor Exam Candidates Tested	0
Certification Class Visits Conducted	0
Number of EMS Agency Re-Inspections Conducted	57
Number of Authorized Inquiry Reports Filed with the Bureau	0

Systems Operations Narrative:

The EHSF approved 4,771 continuing education by endorsements.

#### **Emergency Preparedness Activities**

	Quantity
Coalition / Task Force Meetings Attended (only EMSOF funded staff attendance)	13
Tabletop Exercises Attended / Conducted	0
Full Scale / Functional Exercises Attended / Conducted	0
Special Event Plans Submitted	1
Responses / Deployments	18
Strike Team Agencies	12

Emergency Preparedness Narrative:

Attended or organized 13 outreach events for our EMS/EMA Partners and 21 training days

Spoke at several, regional and statewide conferences

Continued to spearhead the implementation of the Juvare software, especially EMTrack with our EMS and EMA partners

Served on multiple HCC and SCTF sub-committees

Continued engagement with two different HCC and three regional task forces

Served on planning and support cells for multiple full-scale exercises, including two on military installations

Continued to maintain nearly 20, trailer borne HPP assets across one third of the Commonwealth

Attended continuing education courses locally and at the National Fire Academy

Fulfilled 18 requests for special event trailers/assets

UTV 0301 was committed 27 days

UTV 0302 was committed 101 days

Trailer committed 23 days

# **Board of Director \ Health Council Meetings**

DATE:	TIME	LOCATION
08/21/2024	1830	Virtual – Zoom (Board of Directors)
09/18/2024	1830	Virtual – Zoom (Advisory Council)
11/20/2024	1830	Virtual – Zoom (Board of Directors)
12/18/2024	1830	Virtual – Zoom (Advisory Council)
02/19/2025	1830	Virtual – Zoom (Board of Directors)
03/19/2025	1830	Virtual – Zoom (Advisory Council)
04/16/2025	1830	Virtual – Zoom (Board of Directors)
05/14/2025	1830	Virtual – Zoom (Board of Directors)
06/18/2025	1830	Virtual – Zoom (Advisory Council)

# **Medical Advisory Committee Meeting**

DATE:	TIME	LOCATION
09/12/2024	0930	Virtual – Zoom
11/07/2024	0930	Virtual – Zoom
02/06/2025	0930	Virtual – Zoom
05/01/2025	0930	Virtual – Zoom

# **Quality Improvement Committee Meeting**

DATE:	TIME	LOCATION
07/25/2024	1000	Virtual – Zoom
10/24/2024	1000	Virtual – Zoom
01/23/2025	1000	Virtual – Zoom
04/24/2025	1000	Virtual – Zoom

# **Prehospital Operations Committee**

DATE:	TIME	LOCATION
09/19/2024	1000	Virtual – Zoom
11/14/2024	1000	Virtual – Zoom
01/09/2025	1000	Virtual – Zoom
03/13/2025	1000	Virtual – Zoom
05/08/2025	1000	Virtual – Zoom

# **Education Committee**

DATE:	TIME	LOCATION
09/10/2024	1000	Virtual – Zoom
12/10/2024	1000	Virtual – Zoom
03/11/2025	1000	Virtual – Zoom
06/10/2025	1000	Virtual – Zoom

#### **Regional Communication Committee**

DATE:	TIME	LOCATION
08/25/2023	1000	Virtual – Zoom
11/03/2023	1000	Virtual – Zoom
02/02/2024	1000	Virtual – Zoom
05/03/2024	1000	Virtual – Zoom

#### **Regional Accomplishments:**

Increased education opportunities for EMS certification in rural EMS areas. The EHSF continues to provide EMS certification classes to assist rural communities. Classes are provided free of cost to the student with the agreement that the student tuition is covered for a commitment to volunteer/work for a rural EMS agency.

The EHSF debuted its mobile simulation unit to provide continuing education opportunities to EMS agencies and providers in the region.

The EHSF continues to offer CPR classes to assist EMS providers to meet their certification requirements.

The EHSF continues to partner with Avive Solutions to develop the 4-Minute Community in Cumberland County and launched it in Dauphin County. The project has been a multi-year plan to bring high tech, connected AEDs into the county to improve cardiac arrest response. 300 AEDs were deployed to CARE team members throughout Cumberland County starting in January 2024, and 300 AEDs started to be deployed to CARE team members throughout Dauphin County in March 2025.

The EHSF supported the SCTF Health and Safety Conference.

The EHSF continued to provide mobile education/training resource.

The EHSF continued developing resources to support EMS activity in the Public Health space regionally.

The EHSF provided commendations for EMS providers.

- Clinical Save: 115 incidents, 448 providers
- Prehospital Delivery: 26 incidents, 81 providers
- Distinguished Provider: 1 provider
- Meritorious Service: 1 incident, 2 providers
- 25 Years of Service: 61 providers
- Excellence in EMD: 5 incidents, 5 dispatchers