



EMS Readiness: Governor's Public Healthcare Commission Programs

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State EMS Director



THE IDHS WAY



SERVICE

INTEGRITY

RESPECT

We believe public service is a calling and the highest honor. We will safeguard the people and property of the State of Indiana with distinction.

We are committed to the highest standards of character and accountability. We will strive toward the right choice rather than the easy one.

We regard our staff with the highest dignity to ensure the same is delivered to the public.

History



INDIANA GOVERNOR'S PUBLIC HEALTH COMMISSION



Report to the Governor in fulfillment of Executive Order 21-21
Submitted by the Staff of the Indiana Department of Health

- Governor Eric Holcomb established the Governor's Public Health Commission with Executive Order 21-21, which was issued August 18, 2021.
- The Commission first met in September 2021 and met monthly thereafter to study the challenges and successes of our public health system.
- EMS was not specifically mentioned in the initial charge but quickly became a key discussion for the Commission.
- IDHS Executive Director Steve Cox was an emergency preparedness advisor.
- The final report was issued to the Governor in August, 2022.

"An ounce of prevention is worth a pound of cure."
- Benjamin Franklin



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Recommendations



Recommendation 23: Ensure local level EMS readiness through expansion and sustainability of EMS workforce.

Action items:

- A. IDOH in conjunction with the EMS Commission, will conduct a needs assessment of specific EMS gaps in local jurisdictions.
- B. Ensure funding for prioritized recruitment to address EMS workforce shortages and provide mechanisms for cost-sharing related to equipment purchases, particularly in underserved and geographically remote areas of the State.
- C. Establish long-term promotional and retention plans for EMS personnel.
- D. Enhance ongoing higher-level EMS training and expansion of community paramedicine programs.
- E. Improve health outcomes related to preventable injuries and other trauma through enhanced analysis and educational initiatives, increased access to EMS, and other efforts to strengthen the trauma system.

Recommendation 23A: Workforce Study



- IDOH in partnership with IDHS & the EMS Commission contracted with the Bowen Center for Health Workforce Research and Policy at Indiana University for a grant-funded EMS workforce study conducted throughout 2023 but with long-term measurement systems set in place as well.



**INDIANA
EMERGENCY
MEDICAL
SERVICES
WORKFORCE**

- https://bowenportal.org/portfolio/indiana_ems_workforce/

Budget for GPHC Initiatives



- The Governor's Office directed IDOH and partnering state agencies to submit what funding they would need to address the GPHC recommendations.
- Recommendations were put in the legislation, where needed, but also included in the Governor's budget.

State Fiscal Years are July-June.

FY2024 July 1, 2023 to June 30, 2024.

FY 2025 July 1, 2024, to June 30, 2025.

HEA 1001 State Budget



• MOBILE INTEGRATION HEALTHCARE GRANTS		
• 27 Total Operating Expense	FY2023-2024	\$500,000
	FY2024-2025	\$500,000

This is not part of the GPHC actions but is a renewal of the funding for the Mobile Integrated Healthcare Grants that are created in statute. It directly funds the IC 16-31-12-5 MIH Grant Fund.

IC 16-31-12-4 Grant; limitations

Sec. 4. (a) The commission may establish a mobile integration healthcare grant to assist communities in the development and implementation of a mobile integrated healthcare program that has been approved by the commission under this chapter.

(b) The commission may do the following:

- (1) Administer the grant.
- (2) Create a grant application for the grant.
- (3) Develop a process for receiving and evaluating grant applications.
- (4) Establish eligibility requirements for the grant.
- (5) Select recipients of the grant and distribute the funds for an awarded grant.

(c) The commission may only award a grant under this section to an emergency medical services provider agency that is operated by

a:

- (1) city;
- (2) town; or
- (3) township.

HEA 1001 State Budget



- **EMERGENCY MEDICAL SERVICES (EMS) READINESS**

Total Operating Expense

FY 2023-2024 \$6,450,000

FY 2024-20258 \$8,200,000



This is the first direct funding of EMS in the state budget that we are aware of!!

HEA 1001 State Budget



- **Approved uses of the funding are the GPHC recommendations with funding to IDHS and may be used for grants:**
 - (1) To fund initiatives that address EMS recruitment, training, retention, and other workforce challenges;
 - (2) To fund mobile integrated healthcare programs;
 - (3) To improve EMS availability for interfacility transfers;
 - (4) To reduce the financial burden on EMS provider organizations or EMS training institutions to purchase EMS equipment;
 - (5) To conduct a feasibility analysis regarding how computer aided dispatch systems used by public safety answering points in Indiana can be interoperable with the intent to facilitate the closest and most appropriate EMS response; and
 - (6) To fund technology and data connectivity for computer aided dispatch systems used by public safety answering points in Indiana to be interoperable to facilitate the closest and most appropriate EMS response.

Proposal to Governor's Office



Description				FY2024	FY2025
Marketing				\$ 100,000.00	\$ 100,000.00
MIH/Interfacility Transfers Pilot				\$ 1,500,000.00	\$ 1,500,000.00
Workforce Development				\$ 4,100,000.00	\$ 4,100,000.00
911 Interoperability					
Study + Action Plan				\$ 750,000.00	
Implementation					\$ 2,500,000.00
				\$ 6,450,000.00	\$ 8,200,000.00
FY24/25 Biennium Total					\$ 14,650,000.00

Direct investment to EMS programs will be \$5.7 million per fiscal year!

** Note that these numbers could be modified among categories.

911 Interoperability



- 911 interoperability has been a discussion initiated by SEA 247 (2022) which required a report on 911 and Regionalized Trauma.
- IDHS coordinated the report with IDOH and Statewide 911 Board submitted November 1, 2022.
- The workgroup determined that Indiana must have a core principle of the closest, most appropriate EMS for any EMS response.
- The group determined that needs included a study of the collective 911 dispatch systems and then funding for infrastructure.



911 Interoperability



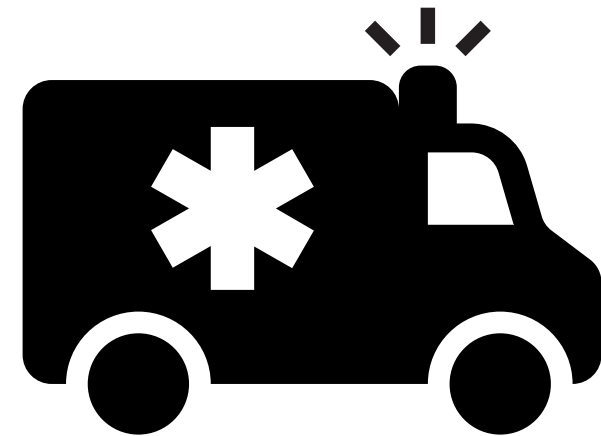
- Funding from the Budget Bill will provide for:
 - FY2023-2024 will fund a 911 system survey and then creation of an action plan to improve interoperability among all the 911 centers across their artificial borders.
 - FY2024-2025 will fund implementation and technology that is recommended in the action plan.



MIH/Interfacility Transfers Program



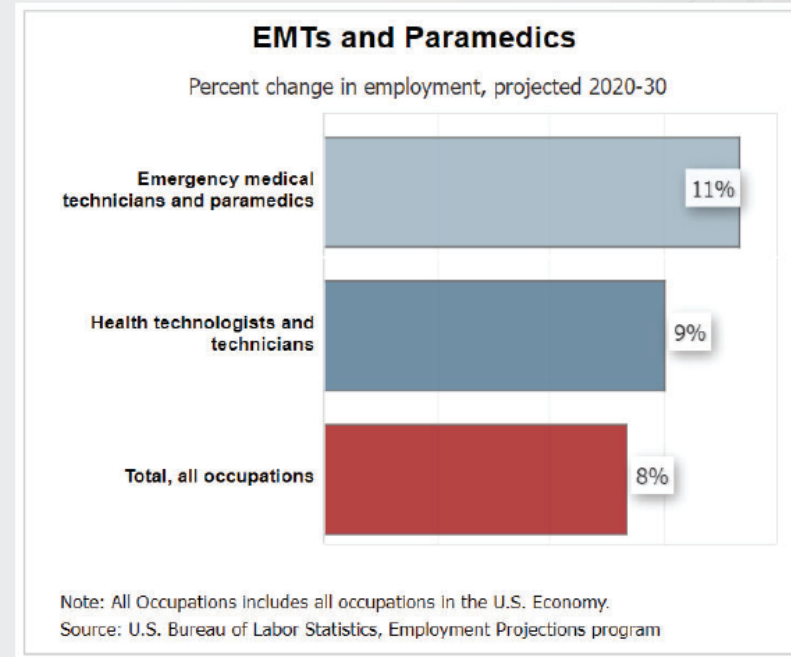
Of the \$1.5 million per fiscal year, money is planned for an Interfacility Transfers Pilot that would recognize innovative regional providers or collection of providers that will address underserved interfacility transfer regions of the state.





The EMS Workforce

- + Changing Paradigm
 - + From 2014-2060, population will increase by 31%
 - + To meet the growing population needs for 2030, workforce demand may increase by 11%



Current Population Reports; US Dept of Commerce. 2015.
<https://www.bls.gov/ooh/healthcare/emts-and-paramedics.htm#tab-6>



Indiana Workforce Goals for Next Two Years

• EMS New Certifications Historical Data (2022)

- EMR 536
- EMT 1,318
- AEMT 68
- Paramedic 262
- Pri. Instructor 80

• EMS New Certifications Annual Cert Goals

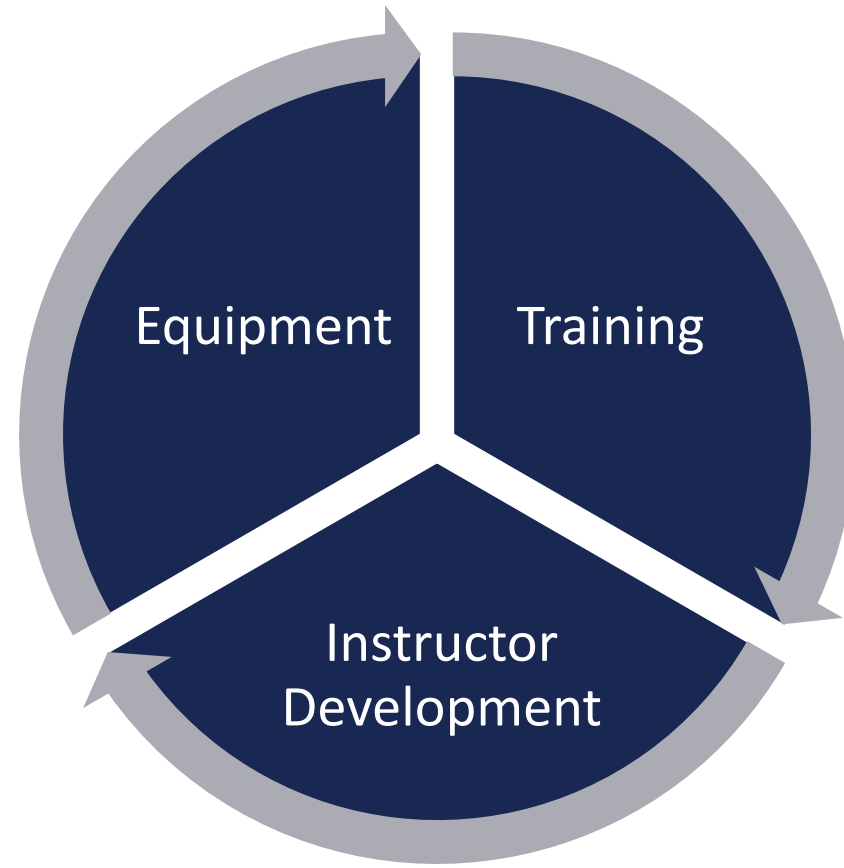
- EMT add 582 in addition so roughly 1,900 new EMTs
- Paramedics add 189 in addition to 262 so roughly 450 new paramedics.

This is an **AGGRESSIVE** plan as we would increase **NEW** certifications for EMT by 45% and **NEW** certifications for paramedics by 75%!!

What is the pathway there?



EMS Readiness / Workforce Development Plan



Equipment



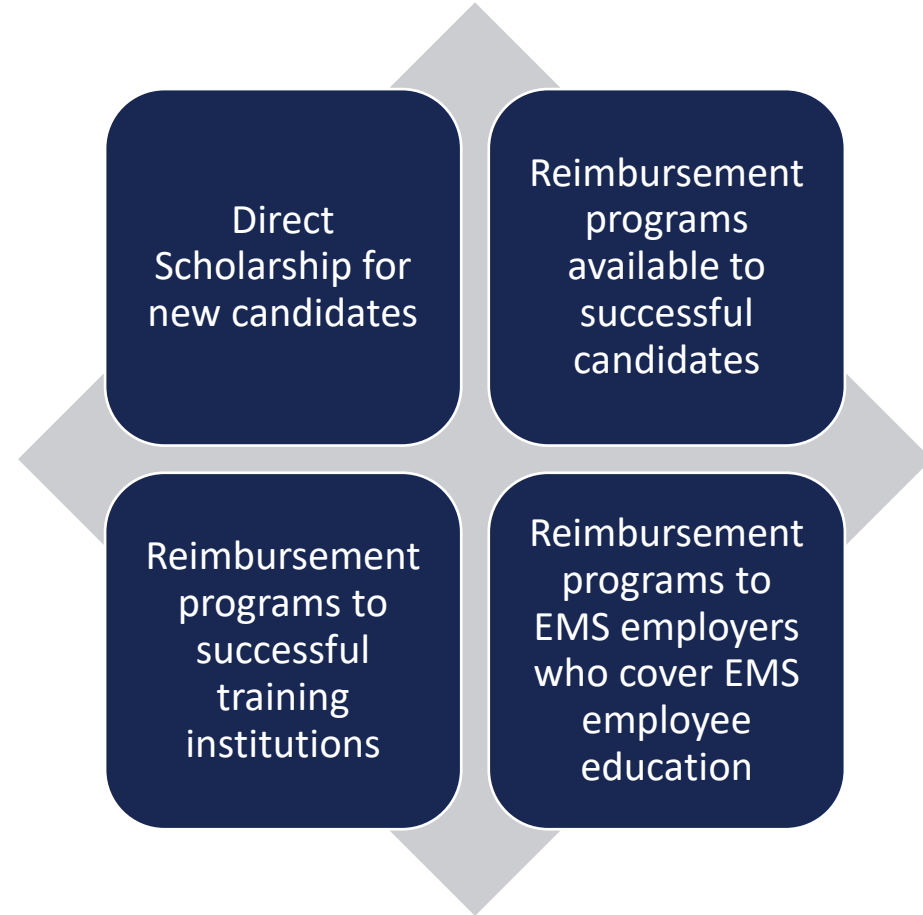
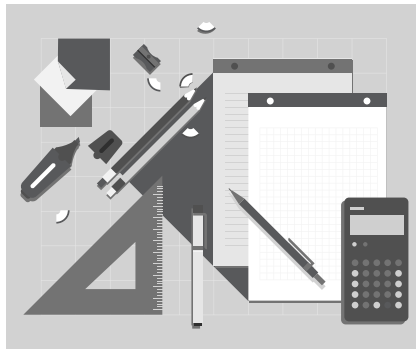
- BLS and ALS equipment likely targeted at training institutions.
 - Priority for new training institutions, particularly ALS.
 - Priority for development of training programs in areas of the state that are underserved.
 - Priority for training institutions that participate in other GPHC EMS programs such as the scholarship programs.

Instructor Development



- Focus will be on both creation of new primary instructors as well as educational programs to assist Indiana primary instructors with continued instructional development in order to improve success of Indiana EMS educational programs and student outcomes with competency assessments.

Expanding the EMS workforce



**UNDER
CONSIDERATION**

Implementation



stay tuned...
More to Come!



THANK YOU

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