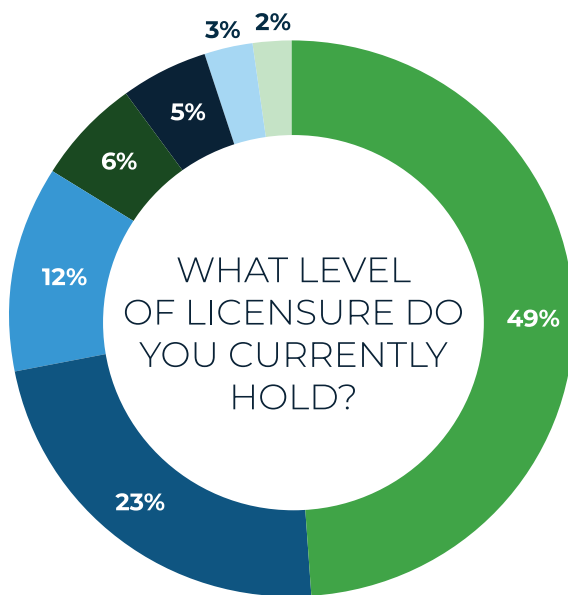




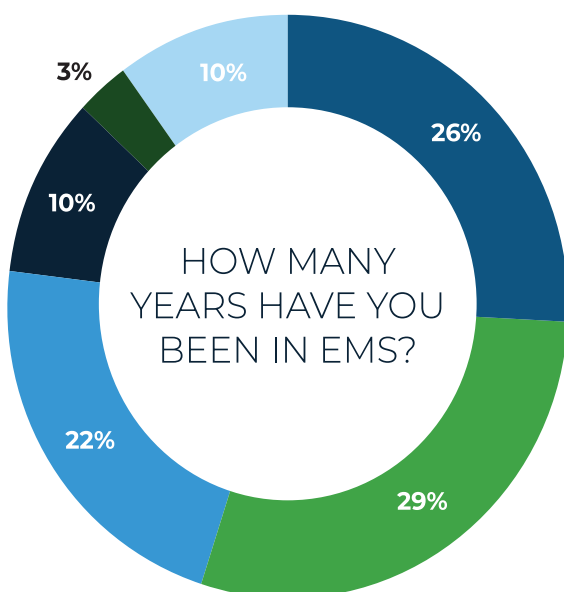
PUTTING THE “E” BACK IN EMS
SURVEY RESULTS

ABOUT OUR RESPONDENTS

We reached out to professionals in the EMS field to ask them about problems they face in the industry, and digging into one problem we hear mentioned all the time: abuse of the 911 system.



- Paramedic EMT
- Basic EMT
- Advanced EMT
- Unspecified Licensure Level
- Critical Care Paramedic
- National Registry of EMT Paramedics
- Comprehensive Flight Paramedic



- 1-10 Years
- 11-20 Years
- 21-30 Years
- 31-40 Years
- 40+ Years
- Not Specified

ABOUT THE PROBLEM: 911 SYSTEM ABUSE

Ambulances are often called to transport patients who aren’t experiencing a medical emergency or don’t need a hospital at all. We asked our respondents their thoughts on these kinds of calls.

90%

Respondents agree that non-emergency transports in the 911 system are a **MIS-ALLOCATION OF TIME AND RESOURCES.**

66%

24%

9%

1%

94%

Respondents that agree patients using the 911 system as non-emergency transport **PUTS UNNECESSARY STRAIN ON OUR HEALTHCARE INFRASTRUCTURE.**

72%

22%

2% 3%

59%

Respondents agree that patients using the 911 system as non-emergency transport is **THE BIGGEST CHALLENGE THEIR SERVICE FACES.**

24%

35%

24%

14%

- Strongly Agree
- Agree
- Neither Agree or Disagree
- Disagree

THE SIZE OF THE PROBLEM: 911 SYSTEM ABUSE

51%

OF RESPONDENTS SAID THEY
TRANSPORT OVER 10 NON-
EMERGENCIES A WEEK

“ ”

A lot of facilities...abuse the system I'm employed at (hospital based system) to take patients from them due to staffing issues and also to the hospital for routine procedures due to a transport agency not being able to transport the patient soon enough.

“ ”

With bed availability struggles, people are “hospital shopping” more frequently.

“ ”

During 2020-2021 (Decrease in overall non-emergent calls with transport to hospital), post-2021 through 2023 (drastic increase, est. 30-40% for nonemergent issues with transport to hospital).

HAVE YOU NOTICED ANY
CHANGE IN NON-EMERGENCY
CALLS AS A RESULT OF COVID?

46%

INCREASE SINCE COVID



34%

NO CHANGE



10%

DECREASE DURING COVID



10%

DID NOT ANSWER OR
ANSWERED N/A



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SO WHAT SHOULD BE DONE?

SOME SOLUTIONS

We asked our respondents to propose solutions to the issue of 911 system abuse. Here were the most frequently mentioned ideas.

#01 Consequences/Cost for Non-Emergent Abusers

“Being able to charge a flat fee even to those on [Medicare], who never ever get a bill for services. Even if it’s a small bill, it would make them think twice if they needed an ambulance or if they could get there themselves. And being able to penalize them for non-payment of bills for a bill that came from non-emergency ambulance usage.”

#02 Educate the Public on Proper Use of EMS

“[Teach the proper use of EMS] in schools at like middle school and high school. Similar to when PD and Fire go to schools talking about when to call 911.”

#03 Allow EMS to Refer Non-Emergencies

“[Give EMS personnel the ability] to transport to alternate destinations (i.e. urgent care clinic) and/or refuse transport for complaints which should be handled by a PCP/in the outpatient setting.”

#04 Healthcare Reform

- “[Create a] tiered response system with BLS and ALS response and transport.”
- “EMS needs to be considered an Essential Service like Fire and Police.”
- “[Provide] better access to mental health care so people don’t always have to wait until crisis.”
- “Community Paramedicine in rural areas.”

#05 Create Non-Emergency Alternatives

“Being able to call for non-emergent transport for patients that do not need an ambulance.”

#06 More Funding, & More Staff

“[We need] much better State and Federal funding and [more people need to realize] that EMS does have an impact on the quality of life in the community.”

OTHER ISSUES FACING EMS

We asked our respondents what other issues are facing the EMS industry. Here are the most frequently referenced topics and what they had to say about them.

#01 Wages

#02 Staffing Shortages

#03 Mental Health & Burnout

#04 Lack of Funding

#05 Leadership

#06 Mismanagement of Time/Resources

#07 Public Perception

#08 Lack of Education & Training

“**Liability and fear of lawsuits** push for facilities and agencies to call 911 for any kind of complaint or the slightest possibility of an injury and EMS is forced to push the patient to be transported whether we believe it is necessary or not.”

“An established legal protocol to **turn away truly non-emergent cases** like the UK’s NHS service would be beneficial.”

“Pay is of course at the top of the list but **most EMTs/Paramedics work a minimum of 48 to 72 hours/ week just to make a decent salary.** In order to work those hours per week most work multiple 24 hour shifts per week.”

“Highly specialized definitive care leads to smaller hospitals not being able to care for anything in my region without **2.5 to 3+ hour round trip transfers** at all hours of a 24 hour shift.”

“By putting so much legal pressure and responsibility back on us, **it makes it very difficult to have an honest conversation with a patient** about ambulance necessity.”

“Identity. Is EMS a public safety service or a specific healthcare branch? **There are too many people that are under-qualified presently running on calls yet education standards/recruitment efforts do not match the nature of the job.** The first course of action should be a proper recognition by those in power that EMS is a separate entity itself & requires necessary government funding to allow for complete overhaul of education & recruitment efforts, especially providing accommodation for agencies who rely on volunteers throughout the majority of the US.”

“**[We need to mentor] new providers** and [give] them tools for dealing with their mental health in the long term.”

“Insurance reimbursement and offering provider status with Medicare is the number one issue. More reimbursement [means] better pay & equipment, fewer staffing shortages, less burnout. **No medic should have to work 3 jobs to have a house in their response area.**”



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SUGGESTED ACTION STEPS

There is no simple solution to abuse of the 911 system and the strain that EMS professionals experience, but here are a few things that could make a big difference.



Reach Out to Your Representatives

Significant change needs to take place in emergency services. Local, state, and federal legislature can help protect both patients and professionals and shape the future of the EMS profession for the better. **NAEMT keeps close tabs on EMS-related legislature on their advocacy webpage (naemt.org/advocacy), so you can research specific bills and look up your representative all in one convenient place.**



Advocate for Community Paramedicine

Community paramedicine is an emerging field in healthcare where some EMS providers, including EMTs and paramedics, are designated to perform “home visits” to those requiring primary care or preventative care. This alleviates the strain on the 911 paramedics by reducing their non-emergency transports. Rural communities would significantly benefit from this model, as they often call 911 because they have no other medical provider available.



Expand Mental Health Services

Lack of mental health services negatively impacts EMS professionals and their patients. People suffering from debilitating mental health issues may have nowhere to go to receive treatment, so they call 911 and often abuse the system. However, EMS also face mental health challenges due to their stressful work. **Contact representatives and inform them that mental health services must be expanded and support relevant legislation.**



Opportunities for Upward Mobility

EMS leaders are advocates for themselves and the EMS professionals employed. However, the EMS career ladder can be confusing, as there’s not always a clear next step for career advancement. The National EMS Advisory Council (NEMSAC) is exploring creating graduate degrees to give EMS clinicians greater authority in a medical emergency (authority to prescribe or refer patients). **EMS leaders should be the best they can be and pour into the next generation of leaders so EMS keeps its talented young professionals.**



Public Relations Campaigns

The public should be aware of the proper use of the 911 system. Education initiatives in schools and community centers could **help patients know when calling an ambulance is appropriate and what the alternatives are when an ambulance is not necessary but medical help is still needed.**