PO Box 368 Camden. ME 04843 **tel** 207 236 8087 **fax** 207 236 9679



info@camdenfirstaid.org www.camdenfirstaid.org

Dear Ladies and Gentlemen:

Enclosed please find Camden First Aid Association's proposal for emergency medical services to the region including Camden, Rockport, Lincolnville and a portion of Hope, together with the following documents:

- Biographies of Service Chief, Deputy Service Chief, and Supervisor
- Replacement Plan for Equipment
- Copies of insurance policies
- Endorsements from individuals/businesses/hospital staff

As the Executive Summary indicates, Camden First Aid Association has provided emergency medical services for over 77 years to the region and our desire is to continue to remain providing this valuable service. We have experienced, well trained staffing that have a genuine concern for the residents in the communities that we serve.

The Board of Directors and management continue to attempt to contain costs without compromising the services. It is difficult at this time to predict the future revenues and effects of the new Affordable Care Act. One thing we can anticipate is the reimbursement will certainly change from what it is today.

It is our goal to continue our long standing partnership with the Region. One step towards that goal is to extend an invitation to the Region to appoint a representative from each Select Board of the communities we serve to attend our Board of Directors meetings. We feel this would form an even more cohesive bond as we work towards a mutually beneficial resolution. The proposal contained within is just one possible avenue.

We have worked tirelessly and diligently for the past two years to overcome serious challenges and feel confident that with the Region as our partner we can achieve financial stability in a mutually agreed upon method and continue to provide the excellent care and service that has been our tradition.

If you should have any questions regarding the proposal, feel free to contact me.

Julia Libby \ ()
Camden First Aid Association

EMS Chief

PO Box 368 Camden. ME 04843 **tel** 207 236 8087 **fax** 207 236 9679



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CAMDEN FIRST AID ASSOCIATION

Proposal for Emergency Medical Services for the Region (Camden, Hope, Lincolnville, Rockport)

Included Documents

o Proposal

Please see Appendix for the following materials accompanying this proposal

- o References
- Organizational Chart
- Cost Comparison Chart
- Expense Budget
- Licenses
- Roster of employees to indicate staffing available to provide covered services
- o Biographies of the management team
- Copies of Liability insurance; Malpractice insurance; Workers Comp. insurance; Vehicle insurance
- Letters from customers
- o Definitions

Camden First Aid Association Emergency Ambulance Service P.O. Box 368 Camden, Maine 04843 (207) 236-8087

PROPOSAL for the PROVISION of EMERGENCY MEDICAL SERVICES COVERAGE to the REGION (Camden, Hope, Lincolnville, Rockport)

Executive Summary

Camden First Aid Association (CFAA), founded in 1936, is a mature and well established independent, free-standing, non-municipal, not-for-profit emergency ambulance service. This ground ambulance service is permitted by State of Maine License to the Advanced Life Support level. Four (4) ambulances housed in Camden provide ALS and BLS emergency care to sick or injured residents and visitors in its primary service area of Camden, Hope, Lincolnville, and Rockport. The service also has a skilled extrication team that responds to vehicular incidents and a skilled technical team for mountain rescue and wilderness first aid.

The CFAA employs Emergency Medical Technicians (EMT), Advanced Emergency Medical Technicians (AEMT), and Paramedics licensed by the State of Maine. CFAA provides emergency medical services to the towns identified in this proposal as the Region, twenty-four (24) hours per day, seven (7) days per week. CFAA responds immediately in accordance with applicable dispatch protocols. The average response rate for the service from the call to arrival at the scene is 8.5 minutes. If CFAA is unable to respond an ambulance immediately due to multiple calls or disaster situations, Regional Dispatch is notified.

CFAA provides emergency medical services in accordance with prevailing industry standards of quality and care applicable to emergency medical services. All staff and vehicles are licensed, certified, and equipped in accordance with federal, state, or local laws.

There has not been any investigation by state or federal authorities or disciplinary action against CFAA.

The service maintains primary medical direction and medical control from Penobscot Bay Medical Center. CFAA is in good standing with Penobscot Bay Medical Center and Waldo County General Hospital. The three (3) CFAA managers currently serve on local, regional, and/or state Emergency Medical Services (EMS) oversight boards.

In 2011 CFAA was restructured. A typical board structure made up of outside community members representing the four (4) towns in the primary service area replaced the less common advisory board made up of employees of the organization. Under the By-laws adopted January 10, 2011, no officer or employee of the corporation may be a Director. The Board of Directors is empowered to oversee and manage the activities of the corporation. The Board officers are Chair, Vice Chair, and Secretary. The Board Chair currently also serves as the Treasurer. The Organizational Chart is attached.

Over the next two years efforts were undertaken to reduce costs. The Board of Directors, EMS Chief, and Deputy EMS Chief have carefully reviewed the anticipated revenue from billing for services, and other revenue sources, reduced the operating budget, and recalculated the expenses associated with providing emergency services and transport. A significant gap between revenue and expenses remained.

Reimbursement by third party payers has changed resulting in decreased revenue. Insurance companies will only pay a certain percentage of a claim submitted for payment. There is quite a difference between what we bill third party payers and the dollars we receive. Medicare (our primary revenue source) is expected to decrease reimbursement by 4%.

To evaluate how we allocated our costs, we compared our percentage of cost accounted for by certain cost components in our current budget to the national average reported in a study issued by the United States Government Accountability Office in October 2012. The percentage of our budget by cost component is comparable to that of the ground ambulances in this national report. (see Appendix)

After thorough evaluation, the Board determined it was necessary to increase the appropriations paid by the towns in the primary service area. The annual bequest from each town has been a portion of our revenue stream but not a true measure of the cost associated with providing this public safety service. Our efforts as a non-profit organization for the last two years have been, and continue to be, to ensure our solvency and meet the challenges of fiscal surety.

The Fiscal Year 2014 and 2015 appropriation for each of the four towns in aggregate is thirty seven percent (37%) of the CFAA expense budget or \$407,000 per year. The per community subsidy is as follows:

\$174,000	Town of Camden
\$129,000	Town of Rockport
\$ 77,000	Town of Lincolnville
\$ 27,000	Town of Hope (portion of Hope as in the current contract)

Goals

- To continue meeting the demands in delivering high quality emergency services to the Region (Camden, Hope, Lincolnville, Rockport)
- To work cooperatively with the leadership of the towns in the Region to meet the emergency needs of their residents and visitors
- To provide a high quality of emergency medical care to the people in the communities we serve in a compassionate, dignified and professional manner
- To create an ethical, caring and supportive team environment for employees with emphasis on safety and competency
- To advocate and promote public awareness of EMS and the service we provide through public education and prevention programs
- To establish a Community Para-medicine program in collaboration with the State of Maine EMS
- To meet the challenges of fiscal surety by continuing development of an economically efficient service to ensure the communities have access to ambulance and crew for immediate emergency response

Assumptions

Contracts for emergency medical services would be negotiated with town(s) if the proposal is accepted.

The emergency medical coverage for Hope will be for half of the town as in the current contract.

Timing: If CFAA is awarded the bid, the contract(s) for emergency services will need to be negotiated. Current contracts will expire on or around June 30^{th.}. In the event this process is not completed with town meeting vote(s) by the expiration of contracts, existing contracts may be extended for up to thirty (30) days.

If CFAA is not approved to continue emergency service contract(s), a minimum of thirty (30) days is necessary to meet Maine EMS rules of 30 days notification of required entities.

References: A list of references is attached.

Licenses

CFAA provides emergency medical services in accordance with the prevailing applicable Maine Emergency Medical Services Rules. Staff and vehicles are licensed, certified, and equipped in accordance with federal, state, or local laws.

Service

Since its inception in 1936 the service has transitioned from a volunteer or on-call service to one in which paid staff are now consistently on duty to ensure immediate response to initial emergency medical calls with BLS and ALS licensed staff.

CFAA will continue to provide emergency service for sick or injured persons in the Region twenty- four (24) hours a day, seven (7) days per week. Staffing levels have been adjusted to maximize coverage for call volume trends /peak hours as follows:

- o Two response teams are on duty 6 am to 6 pm seven (7) days a week.
- One response team is on duty 6 pm to 6 am seven (7) days a week.
- o A minimum of one Paramedic is on duty each shift.
- o A minimum of two (2) persons will respond to each emergency call

A response team is made up of a minimum of two people, but more than two people may respond to serious calls. A Paramedic or Advanced EMT will respond on average to 90% of the emergency calls. Response level(s), ALS or BLS, to emergency calls are determined by the seriousness of the call and local dispatch protocols. From January 2010 through December 2012, Seventy one percent (71%) of the calls were ALS level.

CFAA is capable of providing the coverage noted above. Most employees live within the primary coverage area and will respond to augment existing on-duty staffing on serious calls when requested or to cover additional calls that the on-duty staff cannot cover. Also some employees can leave their regular daytime jobs to assist. The service has first responders in the primary coverage area.

The service responds immediately to emergency medical calls in accordance with applicable dispatch protocols. If CFAA is unable to respond an ambulance immediately due to multiple calls or disaster situations, Regional Dispatch is notified. They dispatch mutual aid backup services per protocols. Mutual aid back-up response is Rockland Fire Department EMS, Union Ambulance Service or Belfast EMS.

If the emergency is a serious vehicular accident, the Access Team is automatically dispatched with the Access vehicle that is equipped with extrication gear including the Jaws-of-Life. The

Technical Team for a mountain rescue is dispatched, if needed, with its specialized rescue equipment.

CFAA may respond to requests for paramedic intercept or to mutual aid calls with a paramedic or other emergency personnel to assist an ambulance service outside the primary coverage area when requested by a service or Regional Dispatch. CFAA only responds to these requests if staffing for the CFAA primary coverage area is met. We have responded to such calls in Rockland, Union, Washington, Appleton, Thomaston, Northport, and Searsmont.

CFAA responds to disasters and hazardous material incidents and participates in a reasonable number of scheduled and unannounced tests of local Emergency Management Plans.

CFAA is being considered by Maine EMS to be one of twelve (12) sites throughout the state to participate in a pilot program for Community Para-medicine. Paramedics in services selected will receive additional training to prepare them for making house calls on people in the community with acute or chronic health problems. They will assess the individual in their home, consult with a medical control physician, treat the person as directed, allowing the individual to remain at home without an unplanned visit to their physician or emergency room with possible admission to inpatient care. We look forward to partnering with physicians and patients to advance the care of our friends and neighbors in their homes.

Personnel/Staffing

All employees meet State of Maine requirements for licensure, certification, and recertification. CFAA has staff licensed to the following levels: EMT; Advanced EMT and Paramedic. The service also has four (4) employees who only serve as drivers. They have completed the Maine EMS Basic Ambulance Vehicle Operator Course. Other certifications or training includes the following:

- o All employees are trained within 30 days of employment in O.S.H.A. workplace safety.
- All employees complete the Maine EMS approved Basic Ambulance Vehicle Operator Course(AVOC)
- o All employees have completed a National Incident Management System (NIMS) program
- All Paramedics are certified in:
 - Pediatric Advanced Life Support (PALS)
 - Advanced Cardiac Life Support (ACLS)
 - Advanced Medical Life Support (AMLS).

The three employees in management roles also respond to emergency calls either as a primary response team member or to augment a team responding to a serious event.

The Technical team and Access team are made up of volunteers from the area. They train regularly to maintain and enhance skills necessary to perform their life saving role. Experts are brought in to teach programs. The Technical Team members are certified to the NFPA standard for technical rescue.

A background check is performed on all prospective new personnel including:

- Criminal history
- Driving record
- Child/elder abuse history
- Office of the Inspector General List of Excluded Individuals from Medicare or state health care programs

A roster of all employees, their licensure level, and date of hire is provided to demonstrate staffing available to cover services.

Biographies of EMS Chief of Service, EMS Deputy Chief, and Supervisor, the key people involved in management of the service, are attached.

Response Times

CFAA is proud of our on-time record for arriving fully staffed and equipped to all 911 emergency calls. This is our community and we respond as if a family member is in need.

The State of Maine Emergency Medical Service Regulations specify response to emergency medical calls within a service's primary coverage response area should be an *annual average* of *twenty minutes or less* from the call for emergency assistance to arrival at the scene.

In the first quarter of 2013 (January, February, March) the service had an average enroute time to emergency calls of one (1) minute fifty three (53) seconds. The average response time (time from call to arrival at the scene) was six (6) minutes and one (1) second in the same time period.

Our average response time over the three year period of January 1, 2010 through December 31, 2012 was 8.5 minutes. (This data is from Maine Emergency Medical Services Run Reporting System without delineation of response time for BLS and ALS service)

With an average response time of 8.5 minutes over a three year period, we do better than meet the annual average of 20 minutes or less stated in Maine EMS rules.

Our expected response time on average to specific locations within the primary coverage area is:

0	Camden:	Camden –Rockport Middle School	4 minutes
0	Норе:	Hope Corner Fire Station Hope Elementary School	13 minutes 15 minutes
0	Rockport:	Camden Hills Regional High School	4 minutes
0	Lincolnville:	Lincolnville Central School	15 minutes

Force Majeure

CFAA shall not be responsible for any delay in or failure of performance resulting from acts of God, riot, war, civil unrest, natural disaster, or other circumstances not reasonably within its control.

Vehicles and Equipment

CFAA maintains a fleet of four (4) ambulances garaged in the CFAA building on John Street in Camden. All are equipped for ALS response. All have current Maine ground ambulance licenses and are fully equipped as required in the Maine EMS rules. The volume of calls and overlapping of emergency calls and transfers warrants the need to maintain four ambulances to allow adequate coverage to the communities served.

Our current ambulance fleet and replacement plan is:

	<u>Vehicle</u>	<u>Type</u>	Replacement Plan
•	1997 Ford E-450 2002 Ford E-450	Type I	Replacement FY2014
		Type I	Replacement FY2016
•	2004 Chevrolet C4500	Type III	Replacement plan to be determined
•	2004 Chevrolet C4500	Type III	Replacement plan to be determined

Capital equipment replacement plan:

•	LifePak 12 (cardiac monitor /defibrilla	cor) Replacement FY2015
•	LifePak 12 (cardiac monitor / defibrilla	tor) Replacement FY 2017

In addition to the four ambulances, the service has the following non-transporting vehicles:

 2002 Chevrolet 2500 HD pick-up truck used as a rapid response vehicle; snow plowing and other maintenance chores; to pull the Technical Response Trailer; to assist emergency teams to access to unplowed driveways and other situations of difficult access

- 1994 Chevrolet 30 HD used by the Access team that is equipped with the Jaws of Life and other extrication equipment
- Haulmark trailer used by the Technical Response team that is equipped with specialized mountain rescue gear

Cost / Fee Arrangement

Reimbursement rates and high fixed costs for maintaining readiness with a crew and ambulance for immediate response to emergency calls contribute to the cost of providing the service.

The Fiscal Year 2014 and 2015 appropriation for each of the four towns in aggregate is thirty seven percent (37%) of the CFAA expense budget or \$407,000 per year. (expense budget displayed in the Appendix) The per community subsidy is as follows:

\$174,000	Town of Camden
\$129,000	Town of Rockport
\$ 77,000	Town of Lincolnville
\$ 27,000	Town of Hope (portion of Hope as in the current contract)

Twenty-five percent (25%) of the annual payment shall be payable quarterly.

Financial Management, Billing, and Service Reports

The organization has submitted three prior years IRS 990's to the Camden Town Manager.

CFAA will submit quarterly financial and service reports to the Region as requested.

Billing for emergency medical services rendered in the towns within the primary service area / Region is currently carried out in-house under the direct supervision of the Billing Supervisor who also serves as EMS Deputy Chief of Service. We plan to continue to manage and staff our Billing Department in-house to ensure that we treat our community members with the utmost respect, as well as to ensure that we are directly aware of organizational performance. Services provided by the Billing Department have been evaluated and restructured to ensure timely submission of claims. In addition customer service has been enhanced through these measures.

The Billing Supervisor has National Coding Certification in Ambulance Coding and maintains current knowledge with continuing education in national education forums; Center for Medicare and Medicaid newsletters and web based forums; and information provided by the local fiscal intermediary.

CFAA will bill and keep all fees for emergency medical services provided from its ambulances, paramedic intercept services, and mutual aid fees. The Region or any part thereof will not seek fees or payment from CFAA, patients, or other third party payers for any emergency services. CFAA shall accept assignment from Medicare, Medicaid, and all private insurance carriers with which CFAA has a valid agreement. CFAA will be responsible for the collection of any and all fees due and owing it by those persons furnished with emergency services.

The Billing Supervisor manages collections of outstanding bills including sending out monthly statements, arranging a payment plan with individuals; sending individuals a "Notice of Intent to File for Small Claims", and submitting outstanding bills to small claims court when all else has failed.

The Billing Department also has a part time employee who has an undergraduate degree in Business Administration from the University of New England who assists in developing financial reports for the CFAA board. This individual is also an EMT and serves on emergency response teams.

CFAA is current on all local, state, and federal taxes, fees, and assessments.

We are focused on providing value to our patients for every dollar because they are our friends and neighbors. We simply cannot pull up anchor and move on when times are hard; our commitment to the community has stood for 77 years.

Bills for the Transportation of Municipal Officials

There will be no additional charge for the emergency transportation of municipal firefighters, police officers, and other municipal officials representing the Region who are injured in the line of duty.

Insurance

CFAA has and will maintain comprehensive general liability, property insurance, professional liability insurance, automotive insurance, and worker's compensation insurance. An employee who experiences an occupational disease exposure or injury is referred to Health Connections, a Department of Penobscot Bay Medical Center, or the Emergency Department.

Copies of insurance(s) are attached.

If CFAA is awarded the bid, insurance policies will be amended to include the names of the contracted town(s).

Indemnity

The Region, or any part thereof that is party to this agreement, hereby agrees to indemnify and save CFAA, its officers, employees, and agents harmless from and against any and all liability (ies), costs, or expense(s) arising or claimed to have arisen from negligence or other fault (except unlawful, willful, or malicious acts or omissions) with respect to responses to a call for emergency services with CFAA personnel.

CFAA agrees to indemnify and save the Region, or any part thereof that is party to this agreement, its officers, employees, and agents harmless from and against any and all liability (ies), cost(s), or expense(s) arising or claimed to have arisen from negligence or other fault (except unlawful, willful, or malicious acts or omissions) with respect to responses to call from emergency services in the Region, or any part thereof, that is party to this agreement.

Quality Assurance

For many years the service has been recognized in the region as a leader in clinical excellence and implementation of best practices as new advancements in pre-hospital care have been introduced.

Our quality efforts have focused on retrospective review to assess what we could do better and applying that knowledge to enhance future performance.

CFAA quality program includes:

- o Attendance at Penobscot Bay Medical Center quarterly EMS quality reviews
- Review of the Maine EMS Run Reporting System (MEMSRR) quarterly report that benchmarks EMS data, provides feedback to help improve quality of patient care reports
- o Internal audits of patient care reports and billing documentation
- o Continuing education to maintain and improve skills in assessment and patient care
- o Customer concern and complaint review / investigation

Findings from the quality review processes above are communicated to employees so they are aware of areas with potential for improvement or areas in which we are doing well. A negative finding may trigger an education program to improve performance.

We do not have a formal patient satisfaction program using a satisfaction survey process. We do receive unsolicited reports from customers by telephone or letters in recognition of outstanding performance by the service or by individuals who provided care to them or a loved one. (see Appendix).

We recognize customer service is important at all times and especially when a person or loved one is faced with an unexpected health problem. To allay stress we allow a family member or caretaker to accompany the patient in the ambulance as long as the team members feel this would not aggravate the problem.

The on-duty supervisor and management team are in contact daily with staff and provide performance feedback and support on a consistent basis.

Value Added Services

We advocate and promote programs on public awareness of EMS through participation in special events. We also have demonstrated a consistent history of community education that contributes to the health and wellbeing of people who live in our communities. The following is a list of some of the positive things CFAA offers to the community.

- CFAA is recognized in Maine as a HeartSafe Community due to its excellent work with community partnerships to improve cardiovascular health and to decrease deaths due to cardiovascular-related events including sudden cardiac arrest.
- Lift assist/ citizen assist such as help to move a citizen from chair to bed or from car into the house
- Blood pressure check stations at local businesses
- Walk-in blood pressure checks at the ambulance station; some residents come in weekly
- CPR and First Aid Classes for local police, fire fighters, schools
- Standby at local school sporting events such as hockey, football, wrestling, mountain biking
- Standby at public events such as the Toboggan Nationals; Camden Windjammer Weekend
- Participation in health and safety fairs
- Education about EMS in day care programs, pre-schools, elementary schools
- Training with the Ragged Mountain Ski Patrol
- Assistance at Flu clinics in schools
- Assists with Special Olympics events and sponsors a team of local athletes
- Firefighter rehabilitation at fire and emergency scene (program developed in conjunction with local fire departments)
- Standby at fire department calls when requested
- Provides continuing education programs for EMTs from all over the area to attend to earn CEHs for renewing their licenses
- New EMT classes are held in the CFAA classroom
- Mentoring program for new EMTs

 Off duty employees serve as first responders to emergency events in the community were they live

Not only do we want to deliver the highest level of patient care through education, training, and equipment, we are connected to the communities we serve and believe in collaborating with our communities for the benefit of the citizens and community partners in the provision of public safety.

Transition Provisions

In the event CFAA is not selected to continue providing emergency medical services to any of the towns with which it currently has a contract, the service will meet the Maine EMS rules for termination of service. CFAA will make written notification to Maine EMS at least 30 days prior to the termination date of the emergency service. The Service shall notify the public at least 30 days prior to the service termination date by placing an advertisement in the most widely circulated newspaper(s) serving the primary service area. The notice shall state:

- A. The name of the service
- B. The date of service termination
- C. The names of municipalities affected by the service's termination.

In addition, CFAA will make written notification to the Regional Dispatch Center at least 30 days prior to the service termination.

CFAA will cooperate with the selected provider in the transition of emergency services.

If CFAA is not selected to provide emergency services to the towns herein referred to as the 'Region', in part or total, this does not imply a change of ownership. CFAA will retain ownership of the fleet, equipment, supplies, and the ambulance building. Therefore Maine EMS rules concerning change of ownership shall not apply until such time as CFAA may make this determination.

CFAA personnel have and will continue to have the option of seeking employment elsewhere.

If CFAA is awarded the bid, the contract(s) for emergency services will need to be negotiated. Current contracts will expire on or around June 30th. In the event this process is not completed with town meeting vote(s) by the expiration of contracts, existing contracts may be extended for up to thirty (30) days.

If CFAA is not approved to continue emergency service contract(s), a minimum of thirty (30) days is necessary to meet Maine EMS rules of 30 days notification of required entities.



PO Box 368 Camden, ME 04843 tei 207 236 8087 fax 207 236 9679



info@camdenfirstaid.org www.camdenfirstaid.org

Proposal:

References:

Chief Charles Jordan City of Rockland Rockland Fire Department 118 Park Street Rockland, Maine 04841

Tel: 594-0318

Mr. Carl Chadwick Knox Center for Long Term Care 6 White Street Rockland, Maine 04841

Tel: 594-6800

Ray Sisk Knox County Emergency Management Agency Park Street Rockland, Maine 04841

Tel: 594-5155

To Whom It May Concern,

This letter is in support of the Camden First Aid Association (CFAA). I am a resident of Camden, however, I am also an Emergency Department physician and the Service Medical Director for CFAA. My role is medical oversight, quality assurance, and education. I review the documentation of the care that these providers offer to our community. This gives me a unique perspective on how this organization is operated and the medical care that it delivers. We are very lucky to have such a strong group of talented and caring individuals available for the people of Camden.

There has been quite a bit of press lately about the expense that would be incurred to maintain the services to which our town has become accustomed. One must remember that quality has a price. CFAA maintains a staffing plan that assures that the highest level of Emergency Medical Services (EMS) is always on call. This large group of paramedic providers is a seasoned and skilled collection of professionals. I review the care that they give, and I would feel confident having my family treated by them, as they have in the past. It is easy to put these services out of your mind until you need them in an emergency situation. It is critical to assure that the medical care offered is always of the highest quality.

There is a Request for Proposal now pending for the EMS services offered to Camden and nearby communities. I would take great care in examining far more than the price of the proposal. There are several important factors to take into account. First, what is the training and experience of the providers? Equally important, will a paramedic level provider always be available, especially in times of high volume? What will be the response times in all of the affected communities? What ties to the midcoast region do the personnel have to enhance their investment in the care that they render? It is not my intent to disparage the companies that may offer alternative bids. I do, however believe that we will receive the most reliable and highest level of care with the services that are currently being provided.

I would strongly recommend maintaining Camden First Aid as our Emergency Medical Services provider. I hope that the local communities agree and vote to retain CFAA.

Thank you

Camden, Maine

OF CA

CAMDEN FIRE DEPARTMENT

31 Washington Street PO Box 1207 Camden, Maine 04843 207.236.7950 cfarley@camdenmaine.gov



April 22, 2013

Regional EMS Proposal Town Manager's Office Town of Rockport PO Box 10 Rockport, Maine 04856

Dear EMS Review Team,

At the request of the Service Chief at Camden First Aid Association, I am providing a letter of reference for the organization's proposal to provide regional emergency medical and transport services. As the Fire Chief for the Town of Camden I interact with Camden First Aid and its personnel on a regular basis.

Over the course of the last five years, I have seen a marked improvement in the service provided by Camden First Aid. The improvements have been noted in several service delivery areas. In the last two years the availability and response times of EMS personnel with advanced licenses has improved. Prior to the noticeable level of improvement; ambulances would often respond in town with personnel at the basic level. On several instances I observed patients who needed a higher level of care than the personnel were capable of providing. During those times, municipal employees of the Fire Department who have higher license levels than the responders from Camden First Aid have would be required to step in to provide an appropriate level of care. Those situations have not occurred recently. Now the case is that ambulances more frequently arrive with personnel at the highest license level. I have also noted an improved response time in general during the evening and weekend. I attribute this to having more scheduled personnel assigned to an ambulance.

I have also seen a palpable improvement in interactions with personnel from Camden First Aid. There is a willingness to work together in providing quality services to the community. There has been a significant shift from an 'us versus them' attitude to one where we work together both during emergency situations and in planning for various activities in the region. Those activities vary from working on emergency plans for events such as the Windjammer Festival and Toboggan Weekend to personnel recruitment and retention issues. This simple shift in attitude has made working together far more enjoyable.

The areas where I have seen improvement are likely indicative of other positive changes in the organization. With the changes in the areas I have noted, the service provided to patients in the region covered by Camden First Aid Association has likely improved as well. I am happy to talk with you further about the organization, its personnel and the service they provide.

SERVING SINCE 1847.

ATLANTIC ENGINE COMPANY NO. 2

"WE COME TO SAVE."



6 Glen Cove Drive Rockport, ME 04856-4240

Tel (207) 596-8000

www.pbmc.org www.penbayhealthcare.org

April 5, 2013

To Whom It May Concern:

I am writing a letter of reference for Camden First Aid Association regarding RFP application. I am currently the Nurse Manager for the PARC Unit (Psychiatric and Addiction Recovery Center) at Pen Bay Medical Center, and have been in this position for the past 15 years. I have also been the Nurse Manager of the OB/Gyn Unit at PBMC from 2007 to January 1, 2013. During my tenure on both units I have been very pleased with the services offered by Camden First Aid Association.

As you can imagine, these two clinical areas are quite different. Despite that, I have been very pleased with the services CFAA has provided to both units. When the OB/Gyn Unit calls for an ambulance, we usually have a critical or urgent labor patient who needs to get to Maine Medical Center as quick as possible. The response has been consistently excellent from response in time (quick!) to making sure the right level of staff are available on the ambulance and communication about our patient's status has been thorough. We routinely send an OB nurse from the unit with our patients and they have consistently stated excellent working relationships with all CFAA staff. When transporting an acute psychiatric patient to another facility, we have often asked for special requests (for example a couple of large strong males) to be on the ambulance related to a patient who could be potentially violent. This has always been accommodated. I have also been very impressed with the level of professionalism from all the staff I have dealt with from CFAA. They have been excellent with very anxious and psychotic patients, just to name a few.

In summary, I highly recommend CFAA as an excellent organization and highly competent staff who have consistently met the needs of the patients on both of the units that I have been manager of. Please do not hesitate to call me or e-mail me with any need for further information. I can be reached at (207) 596-8395 or lbickford@penbayhealthcare.org. Thank you.

Sincerely,

Laura W. Bickford RN, BSN, MBA PARC Nurse Manager, PBMC



Knox Regional Communications Center 301 Park St, Rockland ME 04841

207-593-9132 Fax: 207-594-0441

Linwood L Lothrop
Director

Stephanie A Gibbs
Supervisor

April 4, 2013

To Whom it may concern,

I am happy to provide this letter of reference for Camden First Aid Association, an EMS service that I have had the pleasure of working with for over a decade.

From the time that my agency, Knox Regional Communications Center started dispatch services for Camden First Aid, we have always entertained a good working relationship. From setting up response protocols, dealing with response issues to dealing with Critical Incident debriefings; I have found Camden First Aid to be accommodating, straightforward and dependable.

Camden First Aid currently provides my agency with initial and recertification CPR classes. We've been involved together in various open houses, public educational events and department trainings and I have always found professional, caring and hardworking individuals to work with.

I have no hesitation in recommending Camden First Aid as an Emergency Services Provider, and look forward to a continued relationship with them.

Sincerely,

Stephanie Gibbs, Supervisor

Knox Regional Communications

Stephanie Gibbs

To whom it may concern:

This is a note of reference for Camden First Aid Association.

Al Blackadar NP and myself (Denise Lindahl RN) have been employees of Waldo County General Hospital in Belfast for over 30 years (myself 37 years and Al for 26years). We have been familiar with Camden First Aid Association for all of this time. They have always been a respectful organization (although they went through a rough time and have done a great job under new management to have turned their organization around).

They come to us with many folks from the Camden / Lincolnville area as many folks have primary care providers affiliated with our facility. They also meet the Islesboro EMS at the ferry terminal and transport their pts to the hospital - some come to Waldo County and some go to PBMC.

Their staff provide great care for their patients. They are professional and efficient. They present themselves in a professional and calm manner. They communicate well with their patients, their families as well as the Emergency Department staff.

Camden First Aid is also one service that we call when we need EMS for an interfacility transfer. They try hard to accommodate our requests but there have been times when their staffing levels are unable to accommodate us. They always get back to us in a timely fashion too.

We would recommend that Camden First Aid Association be allowed to continue to serve the communities that they have been serving. The public knows most of the staff as they are friends, family and some are neighbors. It certainly helps to have staff that folks are familiar with and have confidence in caring for them. To change this in our minds would be a disservice to the communities and the public.

Feel free to contact us if you have any questions or concerns.

Al Blackadar NP Denise Lindahl RN

Speaking for myself, I have to say, I am not sure of the issues here. Camden First Aid is an exemplary service dedicated to serve their community. I have never witnessed anything but excellent care given by their members. My understanding is that they are only asking for a reimbursement which will enable them to stay in business and continue to serve Camden and it's outlying community. The budget seems very much in line with EMS budgets across the state. In the immortal words of Bert Lance "If it ain't broke, don't fix it".

Sincerely.

Albert Blackadar NP

CAMDEN FIRST AID ASSOCIATION EMERGENCY AMBULANCE SERVICE

(a Maine Nonprofit Corporation)

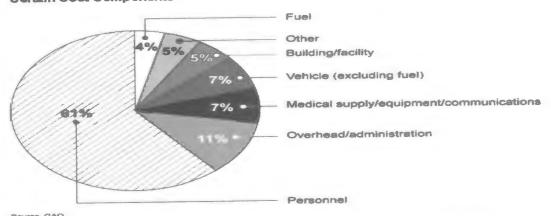
covering

<u>Camden</u> <u>Rockport</u> <u>Lincolnville</u> <u>Hope</u> **ORGANIZATIONAL CHART Board of Directors EMS Chief of Service*** ----- EMS Liaison EMS Deputy Chief * -------Hospital Liaison **Supervisor** * Billing Department **Quality Assurance Paramedics** Coders **EMT-Is / AEMTs EMTs**

Drivers

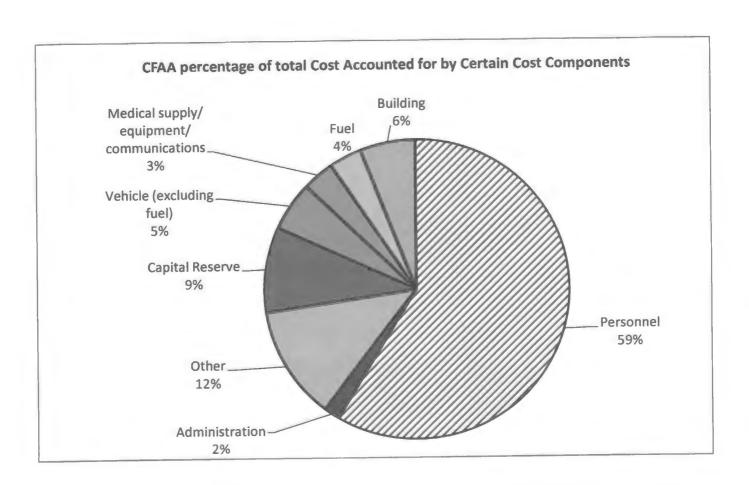
^{*}Position responds to emergency and non-emergency transports

Figure 3: Average Percentage of Ambulance Providers' Total Cost Accounted for by Certain Cost Components



Notes: Data were from the 2012 GAO Survey of Ambulance Services. Percentages are based on reported data from a sample of 154 ground ambulance providers in the United States that billed Medicare in 2003 and 2010, were still operational in 2012, and did not share costs with nonambulance services or air ambulance services. Analysis excludes 11 providers that could not determine cost component percentages. "Other" category includes percentages for cost components not specified in the survey, such as insurance (including workers' compensation, liability, and building insurance), billing services, bad debt, and depreciation.

Source: GAO---Unites States Government Accountability Office
Graph above from GAO report October 2012 "Ambulance Providers"



CFAA Expense Budget Cost Components

Personnel		Building	1	
Payroll EMS	\$363,500	Building expense	31,500	
Administrative Payroll	\$222,000	Heat	13,000	
Health Insurance	\$35,500	Insurance	000′6	
	\$3,500	Electricity	2,000	
Education /Training	\$15,800	Propane	2,000	
)	Total \$640,300	Water	2,000	
		Cable	1,500	
Administation / overhead		Sewer	200	
Professional Liability	8,000		Total \$64,500	
Legal fees	6,500			
Accounting	1,600	Other		
)	1,200	Loan Payment	000'09	
Mutual Aid	1,000	Interest	45,400	
	Total \$18,300	MEMIC	18,000	
		Billing supplies	2,575	
Medical Supply/equipment/communications	nications	Postage billing	3,300	
Medical Supplies	25,000	Travel expense	2,400	
Billing software	2,000	Access team	2,500	
Computer repairs	125		Total \$134,175	
Telephone	8,000			
Internet	2,000	Total all expense budget cost components	cost components	
	Total \$37,125			
		Personnel		\$640,300
		Administration		\$18,300
Vehicle insurance	24,000	Med supply/equipment/communication	ommunication	\$37,125
Fleet expense	34,400	Vehicle		\$58,400
_	Total \$58,400	Fuel		\$38,000
		Building		\$64,500
	Tota l \$38,000	Other		\$134,175
		Capital reserve		\$100,000
	Total \$100 000		-	Total \$1,090,800

Camden First Aid Association List of Employees and Volunteers

<u>Paramedics</u>	Date of Hire	ACCESS TEAM	Data of Him
Allen, Julie Bentley, William Clark, Samantha Hills, Justin Melanson, Brandon Montoya, Kevin Thompson, Jesse Tooley, Debra AEMT (Advanced EMT) Adams, Ellie Lawrence, Paul Libby, Julia Walsh, David	Feb-00 Jul-87 Nov-12 Apr-01 Jul-09 Jun-10 Aug-06 Jan-96 Dec-09 Sep-01 Apr-83	Bartley, N Brown, Phil Eaton, Mike Fullington, Don Gibbons, Steve Guala, Joe Laite, Steve Leach, Logan Rollins, Pete Ryan, Virginia Young, Todd	Pate of Hire Nov-08 Mar-11 Feb-95 Jul-10 Mar-87 Apr-11 Nov-12 May-11 Feb-04 Oct-08
Wright, Brian EMT (Basic) Adams, Ben Allen, Brian E Allen, Brian J Ettinger, Kyle Keller, Clarence Lamontagne, Mike Marriner, Ann Martinez, Adam Morton, Ryan Verite, Eric (RN) Widdecomb, Deanna	Feb-12 Jul-05 Apr-12 Oct-00 May-10 Sep-12 Jan-03 Feb-11 May-87 Oct-12 Feb-12 Mar-07 Feb-11	TECHNICAL RESCUE TEAM Bentley, William Boston, Jeff Martin, Kevin Orsmond, David Rees, Allen Silverio, Matt Wagner, Steve Weaver, John Winters, Eric	Jul-87 Apr-11 Apr-11 Apr-11 Jun-11 Jan-11 Oct-11 May-11 Oct-12
DRIVERS Crockett, Arthur Olmsted, Steve Oxton, Robert Vaughn, Andy	- Jul-97 Feb-12 Jul-07 May-10		

NANDANANANANANANANANANANANANAN





AMBULANCE SERVICE LICENSE

Issued To

Camden First Aid Emergency Ambulance

To render ambulance service at the **EMT-Basic** license level. This license is hereby issued in accordance with Chapter 588, Section 1, Public Laws of Maine 1991 32 M.R.S.A., s81 et. Seq. by Maine Emergency Medical Services.

Permit Level: Paramedic Service #: 0120 Expiration Date: 12/31/2013

Jay Bradshaw, Director

KEEP CONSPICUOUSLY POSTED NON-TRANSFERABLE

BIOGRAPHIES

Julia Libby, EMS Chief of Service: Became Chief of Service in 2010. Julia has been with CFAA since 1983. In 1983 she became an EMT and later was in the first State of Maine Intermediate class. She maintains EMT-I license and certifications. Julia provides oversight in all areas of the organization and the day to day operations. She has been active in EMS serving on the Mid Coast Region 6 Critical Incident Debriefing Team for six years (a team trained to assist EMT's, Firefighters, Law Enforcement and public in coping with tragedy); State of Maine Tester for practical exams for Basic & Intermediate students for 16 years. She currently serves on the EMS Regional Advisory Council and sits on the State of Maine EMS Board.

In addition to her administrative duties, she responds to emergency medical calls in the primary service area.

Julia is actively involved in the community. She served 15 years on the Anita Card Montgomery Foundation (10 years as President) and currently sits on the following:

- Lincolnville Select Board (2nd year of 3 year term)
- Mid Coast Solid Waste Board of Directors
- Mid Coast Solid Waste Personnel Committee
- Elected Treasurer for Camden Rotary Club (position takes effect 7/1/2013)
- Camden District Nursing Association (20 years & past President)

Julia worked 33 years at the law firm of Harmon, Jones & Sanford in Camden as Office Manager. She was responsible for the Real Estate Division, Probate, Payroll, Accounts Payable and, Accounts Receivable. She also served as bookkeeper at Lincolnville Telephone Company for 2 years.

Julia is the face of Camden First Aid Association in the community.

She has been a resident of Lincolnville all her life.

Julie Allen; Deputy EMS Chief and Billing Department Supervisor: Julie came to CFAA in 2000, beginning as an EMT. She continued her EMS studies and in 2007 became a Paramedic. In 2010, Julie achieved national certification in Ambulance Coding as well as certification from Medicare's Skilled Nursing Facility Consolidated Billing Training Course. She is responsible for the Billing Department, provides financial reports to the CFAA Board. Julie also is the Deputy Chief and assists the Chief of Service with operations. She is the CFAA Public Information Officer, receiving her certification from FEMA US Department of Homeland Security in September 2012. She attended the Institute for Civic Leadership and successfully completed a course in 'Building a Board of Directors'. She is responsible for Quality Assurance/Quality Improvement at CFAA, as well as Human Resources. Julie created the Junior EMS Program for Camden First Aid which was certified by the State of Maine. Over the years at CFAA she has been active as a CPR/First Aid Instructor, an EMS Instructor Coordinator teaching several licensure classes.

Julie currently sits on the Regional EMS Board of Directors, the Regional Mid Coast Council, and Penobscot Bay Medical Center's Continuity in Care Committee.

Julie maintains her Paramedic license and has certification in ACLS (Advanced Cardiac Life Support), AMLS (Advanced Medical Life Support) and PALS (Pediatric Advanced Life Support). She responds to emergency medical calls in addition to her administrative duties.

Her business background includes work in local businesses in which responsibilities included: financial statements, purchasing, payroll, Accounts Receivable; General Manager of a large company, and her own Bookkeeping business.

Julie is a graduate of the Shepard Gil School of Practical Nursing at Massachusetts General Hospital. She worked for 16 years in area hospitals. She lives in Lincolnville with her family.

Justin Hills: Supervisor: An EMT in 2002 and a Paramedic since 2007. Justin supervises all ambulance crew members to ensure compliance with all organization procedures and state regulations. He orients new team members, schedules crews for shift coverage, ensures the fleet is good working order; is responsible for equipment and supply inventories for ambulances: instructs new employees in the Ambulance Vehicle Operator Course (AVOC). He is certified in ACLS (Advanced Cardiac Life Support), AMLS (Advanced Medical Life Support) and PALS (Pediatric Advanced Life Support).

He is a certified instructor for AVOC; CPR / first Aid; EMTs. He is certified in HazMat; SCBA; NFPA extrication (Jaws-of-Life); Ice water Rescue; State of Maine Bureau of Labor Standards for interior firefighting. Justin received recognition at the State House in Augusta for assisting the communities CFAA serves (Camden, Hope, Lincolnville, Rockport) to become 'Heart Safe Communities'. He teaches CPR and First Aid in adult education programs and to local businesses. Justin has attended seminars and workshops for Active Shooters and School Violence, including working closely with local law enforcement on simunitions. He has also certified local law enforcement in CPR/First Aid, the use of tourniquets and QuickClot. He is an instructor for the Priority Dispatch System for Knox Regional Communication Center dispatchers.

Justin currently serves on the board of education for the Eastern Maine Community College Paramedic Program; the Executive Committee for the Knox Regional Communications Center (dispatch for this region); and the Board of Directors of Lincolnville Fire Department.

As a paramedic he responds to emergency ambulance calls in the primary service area. He is also a fire fighter with the Lincolnville Fire Department.

He attended Stonehill College in N. Easton, MA receiving a bachelor's degree in Criminal Justice and has worked as a police officer in the Mid Coast area.

In his "down" time he enjoys volunteering for the CFAA Special Olympics Team. He lives with his family in Lincolnville.

Justin's leadership is well respected in CFAA and in this community.

Kreed callenif. com

Camden First Aid Association

Emergency Ambulance Service



NAVIGATING LIFE'S RISKS & REWARDS

Presented by:

Karen L. Reed, CRIS
Valerie Robinson
Allen Insurance and Financial
PO Box 578
Camden, ME 04843
Phone: 800-439-4311

March 28, 2013

THIS DOCUMENT SUMMARIZES THE PROPOSAL FOR YOUR INSURANCE. THIS IS NOT A CONTRACT. THE TERMS OF THE POLICY FORMS WILL CONTROL THE INSURANCE CONTRACT WITHOUT REGARD TO ANY STATEMENT MADE IN THIS PROPOSAL.

Location Schedule

Loc#	Bldg #	Address
1	1	123 John Street • Camden, ME 04843
2	1	437 Main Street • Saint Agatha, ME 04772

Property

Insurance Company : Proposed Policy Period :

AAIC

02/09/13 to 02/09/14

Coverage Detail

Subject		Ar	nount	Val	Co- Ins %	Cause of Loss	Ded	Add'l Info.
Loc #: 1 Bldg #:		1	Ambulan	ce Reso	ue Bui	lding		•

Building	\$1,926,634	GRC	\$	\$ 500	
Business Personal Property	\$177,914	RC	\$	\$ 500	
Business Income/ Extra Expense					Actual Loss Sustained
Flood			\$	1,000	
Earthquake			\$10	05,227	

Loc #: 2	Bldg #: 1	Office Building	
		g	ı

Building	\$221,431	GRC	\$ 500	
Business Personal Property	\$24,333	RC	\$ 500	
Business Income/ Extra Expense				Actual Loss Sustained
Flood			\$1,000	
Earthquake			\$12,888	

Mortgagee/Loss Payee: Camden National Bank

Money & Securities: On or Off Premise

Data & Media:

\$10,000 \$250,000

General Liability

Insurance Company: Proposed policy period:

AAIC

02/09/13 to 02/09/14

Coverage Detail

Limits of Liability	Description	
\$1,000,000	Per Occurrence	
\$3,000,000	Annual Aggregate, Other Than Products	
\$3,000,000	Annual Aggregate, Products & Completed Operations	
\$1,000,000	Personal And Advertising Injury Aggregate	
No Coverage	Damage to Rented Premises	
\$5,000	Medical Expense Each Claim	
\$1,000,000	Cyber Liability Each Event Limit	
\$50,000	Privacy Crisis Management Each Event Limit	
\$50,000	Privacy Crisis Management Expense Aggregate Limit	
\$1,000,000	Management Liability	
\$3,000,000	Management Liability Aggregate	
\$25,000	Each Action for Injunctive Relief	

Equipment Floater

Insurance Company:

AAIC

Proposed policy period:

02/09/13 to 02/09/14

Coverage

Portable Equipment - Unlimited Guaranteed Replacement Cost

Deductible

\$250

Scheduled Equipment

Item #	Description	ID/Serial #	Owned	Amount of Ins.
1	Portable equipment			Guaranteed
				Replacement Cost

Commercial Auto

Insurance Company: Proposed policy period:

AAIC

02/09/13 to 02/09/14

Coverage Detail

Limits	Description
\$1,000,000	Liability Combined Single Limit
\$1,000,000	Uninsured Motorist Protection
\$5,000	Medical Payments
\$1,000,000	Underinsured Motorist
\$1,000,000	Un-Insured Motorist
Included	Non-Owned Auto Liability – Employees
Included	Non-Owned Auto Liability – Volunteers
Included	Hired & Borrowed Auto Liability
Included	Hired Auto Physical Damage – Comprehensive (\$50 Ded)
Included	Hired Auto Physical Damage – Collision (\$100 Ded)
	Employees as Additional Insured
	Rental Reimbursement
Included	Towing and Labor - Auto Extension Endorsement
Included	Agreed Value for Physical Damage on Autos as per Stated Amounts on each Vehicle

Vehicles

Vehicle	Liab	Med Pay	UM	UIM	Comp Ded	Coll Ded
2002 Chevy First Responder 1GCHK29U22E232880	•	•	•	•	500	500
1994 Chevy Rescue LT 1GBKH32N3R3309442	•	•	•	•	500	500
1997 FORD AMB ALS 1FDLE40FXVHA23641	•		•	•	500	500
2002 Haulmark Trailer 16HCB12173P029016	•	•	•	•	No Coverage	No Coverage
2004 CHEVY AMB ALS 1GBE4V1254F521861	•	•	•	•	500	500
2004 CHEVY AMB ALS 1GBE4V1214F522036	•	•	•	•	500	500
2002 FORD AMB ALS 1FDXE45F12HB02055	•	•	•	•	500	500

Auto Liability Extension Endorsement

Auto Physical Damage Extension Endorsement

Agree Value Endorsement

Garage Liability

Insurance Company:

AAIC

Proposed policy period:

02/09/13 to 02/09/14

Coverage Detail

Limits	Deductible	Description
\$50,000	\$250	Comprehensive (primary basis)
\$50,000	\$500	Collision (primary basis)

Workers Compensation / Employers Liability

Insurance Company:
Proposed policy period:

Maine Employers Mutual 07/21/12 to 07/21/13

Coverage Detail

Limits	Description
\$500,000	Employers Liability: Each Accident
\$500,000	Employers Liability: Disease - Policy Limit
\$500,000	Employers Liability: Disease – Each Employee
Included	Workers Compensation: Statutory Benefit

Locations & Classifications

Loc#	St	Code	Description	Payroll	Base Rate
1	ME	7705	Ambulance Svc/Ems Pr	\$385,338	6.87
1	ME	8385	Ambulance Svc Co:Gar	\$6,667	4.47
1	ME	8810	Clerical Office Empl	\$93,975	.48
Experience Modification Factor				Current term 1.11	

Voluntary Compensation and

Employers Liability Coverage Endorsement: 60 Volunteers at \$7.50/hour at 287 hours/month

Commercial Umbrella

Insurance Company: Proposed policy period:

AAIC

02/09/13 to 02/09/14

Coverage Detail

Limits	Description
\$1,000,000	Per Occurrence
\$2,000,000	Annual Aggregate Limit
None	Retained Limit
No First Dollar Defense	Form

Underlying Coverages

Policy Type	Carrier / Policy #	Policy Period	Limits
Automobile Liability CSL Bodily Injury Property Damage	Amer Alternativ VFISTR2065877	02/09/13 - 02/09/14	\$1,000,000 None None
General Liability Each Occurrence General Aggregate Products & Comp Ops Personal & Advertising Injury Fire Damage Medical Expense	Amer Alternativ VFISTR2065877	02/09/13 - 02/09/14	\$1,000,000 \$3,000,000 \$3,000,000 \$1,000,000 None None
Employers Liability Each Accident Disease Policy Limit Disease Each Employee	MEMIC 1810014703	07/21/12 - 07/21/13	\$100,000 \$500,000 \$100,000
Management Liability	VFISTR2065877	02/09/13 - 02/09/14	\$1,000,000 \$3,000,000

Premium Summary / Comparison

Premiums

Line of Business	Expiring Premium	Current Premium
Package	\$25,550.00	\$30,053.00*
Workers Compensation	\$24,891.00	\$24,891.00
Umbrella	\$3,995.00	
Total Premium:	\$54,436.00	\$54,944.00

^{*}The Umbrella Policy is being issued on the Commercial Package policy at the time of renewal. The Proposed Package premium includes the Umbrella coverage.

234 River Road Edgecomb ME 04556 October 30, 2012

Camden First Aid Association 123 John Street Camden ME 04843

To Whom It May Concern:

On September 29, while visiting the Cellardoor Winery in Lincolnville, my husband, Dr. Bruce Cameron, suffered a fainting spell. Since we were on a tour, we had no car; your ambulance transported us to Pen-Bay Medical Center.

I want to thank and commend your driver, Steve Olmsted, and your EMT, Dave Walsh, for their professionalism, courtesy and good humor, which made a very scarey experience much more bearable for both of us.

Yours truly,

Joanna M. Cameron

Der Ken

you sourch his work, children, my gradifieds. In soving my deal, Bureal Syllings. I am et a less for words adequate to express and your colleagues responded to a cell of 4 Cerinal Street and saved the UR of my father, On THISday, April 2rd, you from the loss of a man with a

my terrer, that day. The well-being of everyone in Goden. will never the forget the gift year osth and a huge heart - as you Association for your exceptional hook tremindous sense of humar, generexperienced quite likeally. My Thanks to your entire term and grandchildren, friends and community gave us all , and most especially everyone at the Consider First that and your engoing commitment to

Emergency Medical Technician - Basic

EMT-Basic (EMT-B) is considered the entry-level point for the majority of EMS providers in Maine. A person must be licensed (at least) as an EMT-B in order to provide unsupervised care in the patient compartment of an ambulance.

The EMT-B curriculum includes medical emergencies, trauma emergencies, pediatrics, obstetrics, EMS operations, and others. The Maine Spinal Assessment Program is also included in the EMT-B curriculum. EMT-B students must also complete observational clinical time in the hospital Emergency Department (ED) and an EMS agency "ride-along". Licensed EMT-Bs may perform the following skills:

- Oxygen agministration
- Use of basic airway devices
- o CPR
- Use of an AFD
- Emergency chilabirth
- Spinal immobilization
- Application of simple extremity splints and traction splints
- Vital signs, patient physical assessment and history taking
- o Care for amputated parts
- Control bleeding
- Dealing with special patient populations (pediatrics, genatrics)
- Assist the patient with self-administration of the patient's own prescribed medical Control (OLMC)
- Administration of Aspirin with On-line Medical Control (OLMC) direction to patients experiencing ischemic type chest pain
- Administration of oral glucose preparations to the conscious patient experiencing a diabetic emergency

Emergency Medical Technician - Intermediate / Advanced

EMT. Intermediates provide all the care authorized at the EMT-Basic (EMT-B) level as well as limited intermediate life support (ILS) interventions

The Maine EMS EMT-Intermediate curriculum includes: advanced airway management, single lead electrocardiogram (ECG) monitoring, medical emergencies, trauma management, intravenous/intraosseous (IV/IO) therapy, basic pharmacology, and ALS operations.

Clinical rotations occur both in the Hospital and field. Hospital clinical includes rotations in the ED, OR, ICU, IV team and Respiratory Therapy. Hospital clinical time is designed to build on skills learned in the classroom and lab settings, as students begin to apply newly learned therapies under the supervision of a preceptor.

Field clinical time focuses on developing the student into a functioning field ALS provider. Decision-making, skill performance, and team management skills are assessed during this phase

The focused nature of the curriculum, allows the EMT-Intermediate to perform the following low risk, high benefit ILS skills in the prehospital setting:

- · ECG monitoring (limited rhythms,
- Manual defibrillation
- · Advanced airway management options (per protocols)
- · Limited medication administration (most with On-line Medical Control direction)
- . Is travenous (IV) insertion
- Intraosseous (IO) insertion
- Continuous positive airway pressure (CPAP) *
- 12 lead ECG acquisition *

Emergency Medical Technician - Paramedic

EMT-Paramedic is the highest level of EMS provider in Maine. The EMT-Paramedic possesses advanced assessment, treatment and patient-management skills and knowledge.

As in the EMT-Intermediate training program, the EMT-Paramedic student must complete a significant didactic and clinical education program. The EMT-P program provides a more in-depth course of study of the topics covered in both the EMT-B and EMT-I programs and also includes: pathophysiology, advanced patient assessment, advanced pharmacology, cardiac emergencies, neurological emergencies, encocrine emergencies, trauma assessment, and ALS operations

Clinical rotations occur both in the hospital and field. Hospital dinical includes rotations in the ED, OR, ICU, IV team, pediatric intensive care unit (PICU), neonatal intensive care unit (NICU), Respiratory Therapy, Labor and Delivery, Psychiatry, Geriatrics, Civic leadership, and electives

Field clinical time is designed to allow the student to start to gain mastery of the necessary prehospital skills under the evaluation and guidance of a parametic preceptor.

Main's EMS licensed Paramedics are permitted under the Maine EMS Prehospital Treatment Protocols and Main's EMS Rules to provide all the skills of the other licensure levels plus:

- · Endotracheal intubation (oral, nasal or digital)
- · Needle cricothyrotomy
- · Surgical cricothyrotomy
- Needle thoracostomy
- Synchronized cardioversion
- Medication administration
- . 12 lead acquisition and interpretation
- . Transcutaneous pacing
- CPAP *

^{*} For those who have successfully completed this Maine EMS approved upgrade training

^{*} For those who have successfully completed this Maine EMS approved upgrade training.