

Testimony in Support of LD 245

An Act to Implement the recommendations of the Blue-Ribbon Commission to Study Emergency Medical Services in the State

Good morning, Senator Beebe-Center, Representative Hasenfus and members of the Criminal Justice and Public Safety Committee. My name is Rick Petrie, and I am a Paramedic who has worked in the Maine EMS system for 42 years. I am now the Chief Executive Officer for North East Mobile Health, and I was fortunate enough to be a member of both EMS Blue Ribbon Commissions.

I am testifying today in support of LD 245. There are several items in this bill that are being addressed with other bills before the legislature, but there are still several important issues that need to be addressed:

1. Adoption of a Plan:

This is an important addition to Maine Law. The only change I would request is that the words "may adopt" be changed to "shall adopt". The concern that prompted the use of the word "may" was that this was an unfunded mandate. While the adoption of a plan may, in fact, cost a municipality money, it will help prevent disasters like the one we recently experienced when a patient died while waiting 90 minutes for an ambulance to arrive. That area had no plan for the delivery of EMS. We have heard from a number of rural areas of the state that we will call 911, and someone will show up. That is just not true.

2. Establishing a permanent EMS Commission:

We were able to complete a lot of good work with the Blue-Ribbon Commission, but it was just the tip of the iceberg. The delivery of EMS in a state as diverse as Maine is a very complex undertaking involving many different types of organizations, from small volunteer agencies that hold fundraisers every year to buy ambulances and equipment to the fully funded departments in our larger metropolitan areas. The organizational make-up include non-profit organizations, hospital-based services, for-profit services, and municipal departments. We have a significant impact on every single community in Maine.

EMS is a small department within the Department of Public Safety. We have had very limited success over the years getting the ear of the Legislature because our concerns about funding and structure did not make the priority list.

The Blue-Ribbon Commission changed that for us. For the first time, Maine State Government heard about the fragile state of EMS in Maine, and began the process of trying to re-build the foundation of this critical, essential, service.

We have to continue this important work or we will continue to struggle, services will fail, and calls will go unanswered.

The language around Commission composition and quorum may need to be refined in order to maximize the operational efficiency of the Commission, but it is critically important that we establish the permanent commission.

3. Needs analysis for Regionalization:

Regionalization, particularly in the rural areas of the state, remains an important concept that will help address staffing shortages, operational inefficiencies, and resource management. The idea that every municipality and political subdivision in the State of Maine should have their own ambulance service is outdated and impractical. When you get outside of Maine, many states utilize County-based agencies to manage their 911 EMS response. Maine should task the EMS Commission with developing a system for the delivery of EMS outside of our larger metropolitan areas that increases the operational and financial efficiency of the operation. As we have seen, this task cannot be left to individual municipalities to develop on their own.

Thank you for your consideration, and I'll answer any questions you may have.

Rick Petrie, EMT-P
rpetrie@nemhs.com
207-754-9109