Emergency Medical Services

Kim Sanders

Southern Illinois University Carbondale’s Center for Rural Health and Social Service Development (CRHSSD) was awarded funding from the Illinois Department of Public Health’s Critical Access Hospital Network to conduct an Emergency Medical Services (EMS) Analysis in twelve counties in Southern Illinois.

The goals for the Rural Emergency Medical Services Analysis were:

• To identify elements essential to providing quality EMS services
• To identify the management and funding structure of EMS
• To assess the perception of those entities working closely with EMS providers regarding the quality of service

The study included the Southern Illinois counties of Alexander, Franklin, Hamilton, Hardin, Jackson, Jefferson, Johnson, Massac, Perry, Pope, Pulaski and Union.

A survey and key informant interview was conducted with each EMS provider operating in the twelve counties. In addition, a satisfaction survey was administered to first response providers in each county who worked closely with emergency medical service providers. These providers included fire chiefs, police chiefs, and hospital emergency room personnel.

Based on information drawn from the provider surveys, key informant interviews, and the satisfaction surveys, following recommendations were made:

• Reexamine the Medicaid reimbursement rate formula in the State of Illinois. Currently providers are reimbursed at approximately 25-30% of their costs which providers indicate is grossly inadequate
• Allocate grant funding at the federal and state level earmarked specifically for EMS equipment and communications upgrade and replacement
• Examine the staffing and training requirements for EMS personnel in rural Illinois while providing an avenue to fund changes and increases in these requirements
• Recruit, train and compensate local resource hospitals to be a greater asset to EMS providers by furnishing the resources needed for technical assistance and training
• Examine the staffing and training requirements for EMS personnel in rural Illinois while providing an avenue to fund changes and increases in these requirements
• Establish a statewide EMS resource network which will focus on the following issues:
  • Effective billing practices
  • Customer service training
  • Community education
  • Marketing
  • Creative staffing
  • Training
• Establish a statewide education campaign regarding the importance of quality EMS in counties or regions
• Invite and educate EMS providers to have a voice in state policy which affect them
• Actively pursue and encourage the development of adequate non-emergency transportation systems in rural areas which can be utilized appropriately to increase access to health care

STAFF UPDATE

Betty Z. Taylor

Betty Z. Taylor has recently accepted the position of Community Outreach Partnership Center (COPC) Coordinator with CRHSSD. The goal of the COPC project is to develop programs and initiatives in North Carbondale targeting education, housing, health, economic development, and neighborhood revitalization. Betty has worked with the COPC Project since 2002 in various positions. She holds a Masters degree in Human Development and Counseling and is pursuing a Ph.D. in Counselor Education and Supervision with a specialization in Drug & Alcohol Counseling. Her professional experiences are in HUD public housing programs, youth services, counseling of teen parents, and providing academic advising and counseling to junior college and university students.
Disability Status of Children in Rural Southern Seven Counties of Illinois

Ainon N. Mizan

Data on disability status of children (table below) show mental illness to be the primary form of disability across all select counties in Illinois.

<table>
<thead>
<tr>
<th>County</th>
<th>Total number of children (age 5 – 15)</th>
<th>Number of children with one disability (% of Total)</th>
<th>Type of Disability (percent of number of children with one disability)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Sensory</td>
</tr>
<tr>
<td>Alexander</td>
<td>1,605</td>
<td>110 (6.9%)</td>
<td>12 (10.9%)</td>
</tr>
<tr>
<td>Hardin</td>
<td>554</td>
<td>23 (4.2%)</td>
<td>0</td>
</tr>
<tr>
<td>Johnson</td>
<td>1,492</td>
<td>97 (6.5%)</td>
<td>16 (16.5%)</td>
</tr>
<tr>
<td>Massac</td>
<td>2,125</td>
<td>196 (9.2%)</td>
<td>64 (32.7%)</td>
</tr>
<tr>
<td>Pope</td>
<td>582</td>
<td>41 (7.0%)</td>
<td>0</td>
</tr>
<tr>
<td>Pulaski</td>
<td>1,326</td>
<td>68 (5.1%)</td>
<td>13 (19.1%)</td>
</tr>
<tr>
<td>Union</td>
<td>2,726</td>
<td>143 (5.2%)</td>
<td>6 (4.2%)</td>
</tr>
</tbody>
</table>

The Census Bureau defines disability as a long lasting physical, mental or emotional condition. Disability is determined for non-institutionalized children age 5 to 15.

Source: Population Reference Bureau, analysis of data from the U.S. Census Bureau, 2000 Census Summary File 3 (Table PCT26), accessed at http://www.aecf.org/ on 10/14/04

According to Gamm & Pittman in Rural Healthy People 2010, a critical issue in meeting the needs of children with mental health problems is the lack of child psychiatrists in rural areas. The trend continues to be a challenge for this part of Illinois.

Any questions regarding the CRHSSD Center Briefs should be addressed to the Editor, Ainon N. Mizan, at 618-453-4283 or ainon@siu.edu