

EMS TRANSITION UPDATE

Alberta Urban Municipalities Association
2009 Convention

Background

- May 28, 2008, Minister of Health & Wellness announces transition
- April 1, 2009, transition of funding and governance to Alberta Health Services

Guiding Principles

1. Responsive to urban and rural needs
2. Aligned with delivery of health care
3. Maintain public safety role
4. Consistent medical oversight
5. Costs predictable and transparent

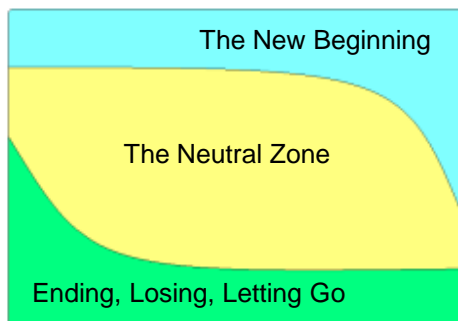
Deliverables

1. Transfer of governance and funding, with no degradation of service
2. Dispatch consolidation
3. Provincial Medical Oversight

Transitional Change

- Psychological vs. simple change
- 3 phase process

Transitional Change of EMS



- Transition starts with an ending and ends with a beginning

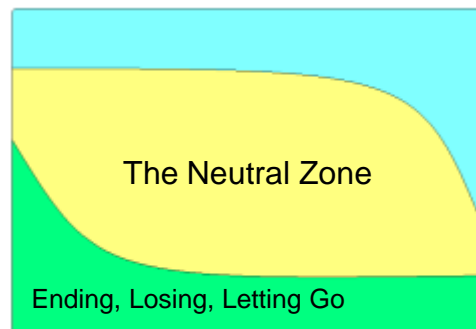
From: *Managing Transitions, Making the most of change*. 2nd ed, author: William Bridges

Ending/Losing/Letting Go



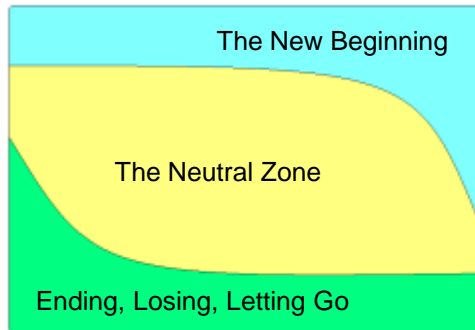
- An ending
- A sense of loss

Neutral Zone



- Old is gone but new isn't fully operational

New Beginning



- New identity, new energy, new sense of beginning

Minister of Health & Wellness' Vision

- Improve overall patient care through a coordinated, province wide system of EMS
- Create a system of EMS response without reference to political, administrative or other boundaries
- Implement standardized approaches to medical direction and oversight
- Consolidation of dispatch
- Priority consideration for patient care in all aspects of decision-making and delivery

EMS: Where are we going?



- Fundamental shift from municipal focused borders and priorities to a coordinated provincial system, aligned with health priorities, while not losing sight of municipal public safety needs

"The world fears a new experience more than it fears anything."

D.H. Lawrence

EMS: Where are we now?



Service Delivery

- Direct delivery in 13 locations, with 4 more transitions in progress
- Current contracts with 59 service providers
- Consolidation of 9 Dispatch Centres; 23 to go
- Framework for consolidated medical oversight in place

EMS: Where are we now?



Reaction to Transition

- Mixed
- Greater challenges for Integrated Fire/EMS Services
- Service levels maintained

"It doesn't work to leap a 20 foot chiasm in two 10 foot jumps."

American proverb

Change triggers changes

- Business process integration
- Clinical integration initiatives
- Key clinical focus areas
 - Seniors Health
 - Mental Health
 - Emergency Department
 - Public Health Initiatives



EMS: Challenges of Transition

There is no fruit which is not bitter before it is ripe."

Pubilius Syrus (latin writer)

Positive Benefits of Transition

- Enhanced patient focus
- Consistent standards of care enabled
- Share learnings
- Share resources
- Enhanced coordination

What is the future of EMS?

- Visioning process

EMS Vision Statement - Proposed

- EMS provides high quality and patient-focused care, through skilled practitioners utilizing the unique mobility of EMS resources. EMS continually strives to enhance patient, public and practitioner safety.
- EMS works with other members of the health care team to meet changing patient needs, while continuing its role as an integral component of the social safety net.

Questions

