

**SPECIAL SESSION RUSH COUNTY BOARD OF COMMISSIONERS MAY 9, 2018**

The Rush County Board of Commissioners met in special session Wednesday, May 9, 2018 with Commissioners Paul Wilkinson, Mark Bacon, and Bruce Levi, Jodi Harr, Auditor, and Leigh Morning, County Attorney, in attendance.

Paul Wilkinson called the meeting to order at 1:00 p.m. with the Pledge to the flag.

Roll Call was taken for county council members who were present. In attendance were Steve McCorkle, Gerald Mohr, Charles Smith, and Janet Kile. Warren Norris, Scott McCorkle and Marvin Hedrick were not in attendance.

The purpose of the special session was to continue discussion of the EMS study for Rush County conducted by Fitch & Associates. Commissioner Wilkinson reminded those in attendance of the amount in the 2018 budget. The council has stated there is no extra dollars available. The commissioners need to discuss this further so it is being done in a public meeting. Public comment was taken at the last special meeting so there will not be room for a great deal of public comment today.

Commissioner Levi believes that the solution is one provider which would make it easier to know what the funds are being used for. With tax revenue decreasing, we need to look at what is best for the county as a whole with the funds available. The commissioners have heard discussions but has not heard a united front on a solution. He believes one service saves dollars. Levi also commented as he has talked to others within the state, he takes great pride in knowing the service that our county offers. We have the most ambulances per population base in the state. The decision that has to be made is strictly because of the financial situation of the county.

Commissioner Bacon commented the final decision will be made by the commissioners and whatever the decision is, it will not be a popular decision for everyone. He believes there needs to be someone to overlook the entire system making sure all agencies are accountable to what the county and citizens expect, maybe look at an umbrella insurance to cover all agencies, and look at if we need all the ambulances that we currently have.

Commissioner Wilkinson has received the following three proposals: (This is a summary of the proposals)

- Continue the service as it currently is. He noted the county cannot afford this option.
- Divide the county into three sites with one ambulance at each site, one ALS at each site, one county coordinator, one medical director and no subsidy for transfers.
- One service for the entire county (three providers expressed interest in this), the volunteers stay in place and no subsidies for transfers.

Wilkinson is not sure if one of these options is the best or do we come up with a hybrid of the three suggested options.

Nick White with Anderson Township Fire Department asked the commissioners if they have looked at expenses in counties similar in size to Rush County. Wilkinson commented yes they have. Our county is providing excellent service with the resources we have available. The question is can we continue to provide these same services.

Phil Dearing with Rushville Township Volunteer Fire Department commented that they are a responding service only. In 2017 forty nine percent of their calls were EMS calls. They have signed more volunteer EMT's and provided them first response kits. He asked that the commissioners not forget about the non-funded departments. Wilkinson noted that discussion was held on providing a jump kit for EMT's if another provider is providing the transporting ambulance.

Jeremy Green with Carthage Volunteer Fire Department commented that if the commissioners go to one simple service and remove the volunteer departments, it will cost the county more in the long run. RMH only hires already trained staff. Volunteer Departments pay for the training needed for their volunteers. He asked if the county has considered a county run ambulance service. Wilkinson answered yes they have. They do not know where they would find the time, experience and staff to operate it. They have looked at how services are provided in other counties. A great deal of them are finding private services to provide the ambulance service. Rushville City Fire Chief Chuck Jenkins noted the city fire department started the ambulance portion of their department with \$26,000 in a non-reverting fund. They now operate completely on EMS revenues.

Nansi Custer speaking as a Rush County citizen believes the two things the county cannot do without are emergency services and Rush Memorial Hospital. She noted everyone in attendance has the best interest of the citizens in mind. Comradery, friendship and most importantly solidarity is needed. We need to put the past in the past, provide the best service, maintain the current service and all work together. She suggested the following:

- Keep the ambulances that we have.
- Keep the availability of paramedics.
- Regarding the money – ask for a proposal from the City of Rushville to cover the central part of the county. Ask Rush Memorial Hospital what the county can do to help provide services at the hospital that will make the hospital money. Take the extra money that can be saved from other proposals to give to Rush Memorial for a non-ambulance service.
- We have to move forward economically.

Councilman Steve McCorkle stated he believes the subsidy being paid by the county to Rush Memorial Hospital is not being used properly. He would like to see a detailed profit/loss statement from the hospital.

Dan Starkey with Raleigh Fire Department agrees that a central person is needed to manage the county EMS reporting to the county. He asked about the Rush Memorial standard protocols. Commissioner Levi noted the county started with one set of protocols and now each department has their own. Levi agreed with Custer that a medical director and protocols are most important. Custer commented the different sets of protocols are somewhat due to egos between the different departments; however, basic EMT's were having to call a medic for almost every call they were on. Patient care is the most important but you have to allow basic EMT's the opportunity to use their skills, as long as patient care is not jeopardized, in order to build their confidence and to maintain the skills required. Commissioner Wilkinson noted we have to move beyond history. We will more than likely request one set of medical protocols. Jeremy Green agrees there should be one protocol but the protocols should not be in favor of one organization with leniency toward where to transport the patient, etc. McCorkle believes that all parties need an equal say in developing the service and protocols.

Commissioner Bacon stated he would like see one set of medical protocols, one county staff member to coordinate the services, and everyone work together to put this in place. He would like to put a committee together to sit down and put a system proposal in place. He does not want to lose any ambulances in any part of the county. Wilkinson commented the commissioners need to make a decision and then form an on-going committee. The current ambulance agreements are through July 14, 2018. We have to move forward together with compromise.

Steve Ward commented the commissioners need to make a decision. He feels like there should be one central person not from this county to be the leader of the EMS services. You need one person to say this is the final decision. He also believes the fire/EMS departments get along better now than they ever have.

Jenkins asked the commissioners if they want a price to provide service or do they want a proposal. What do you want a proposal for? He can do a proposal if they give him the time to do it correctly. Discussion was held on the details of the requested proposal, how to configure the system, the number of paramedics and the number of ambulances.

Green commented that Carthage Fire Department is willing to extend the addendum to the current contract in order to give the commissioners time to make the best decision. Nick White with Anderson Twp. commented that this is too critical of a decision to rush into by Monday, May 14. They will continue service while the commissioners make a decision. Raleigh agreed to the same. Rush Memorial Hospital would have to get permission from their board before making that commitment.

Chuck Kemker, EMA Director, commented that his research shows that one centralized agency seems to be the consensus. Twenty eight percent of EMS is fire based in the state of Indiana.

Eight to ten percent is the more accurate statistic on E911 calls requiring a paramedic. The county would need to offset funding to first responder departments.

Bruce Levi made a motion to take a fifteen minute recess and resume at 2:30. Mark Bacon seconded. Motion carried.

Paul Wilkinson called the meeting back to order at 2:30.

Wilkinson noted that during the break he did confirm that Rush Memorial Hospital is operating the ambulance service in the red at this time.

Bacon suggested a committee be put together to look at the proposals. Suggested members would be Nansi Custer, Chuck Kemker, Chuck Jenkins, a representative from RMH, County Fire Chiefs Association, and Charles Smith as county council representative. Hospital board member John Byrne asked who would be leading the committee. He suggested having someone from outside the current structure to help the committee. Bacon noted it would cost more to hire the consultant for additional services. Jenkins asked if the committee would use the proposals already used or is the commissioners going to issue an official Request for Proposals. Steve McCorkle commented the commissioners have to give a direction to the committee and to the agencies involved. Wilkinson commented they are considering one county coordinator, one medical director, and one set of protocols. Councilman Charles Smith commented the three commissioners need to decide what kind of service you want to provide and then let the departments tell you which services they can provide and the cost.

Commissioner Mark Bacon made a motion to accept proposals to be based on a service in the northern area of the county, a service in the central area of the county, a service based in the southern area of the county, one county coordinator, one medical director, one set of protocols, one reporting system used by all, and to form an advisory committee to look at proposals with a recommendation being given to the commissioners by May 29, 2018. Paul Wilkinson seconded and requested proposal be received within the next two weeks. Further discussion was held.

Carrie Cloud, Attorney for Rush Memorial Hospital, asked for clarification on what the committee is for and what the proposals are to consist of. Wilkinson answered the proposal should say what services the department wants to provide and the cost to provide it. She then asked if the proposals were going to the committee or to the commissioners and when are they to be turned in. Wilkinson answered proposals go to the commissioners within two weeks from today. Byrne asked the role of the committee is what. Wilkinson answered the committee will bring to the commissioners a recommendation on how to improve the proposals.

Phil Dearing spoke as a tax payer. The question everyone is thinking but not asking is why Rush Memorial Hospital is showing a deficit in funds. Wilkinson responded because they are

providing paramedics and full time staff. The hospital agreed to operate the ambulance on a break even status.

After much discussion on the purpose of the committee, the commissioners voted on the motion on the floor. Levi, Bacon and Wilkinson all vote nay. Motion died.

Paul Wilkinson made the motion to request proposals based on a northern, central and southern service district, one county coordinator, one medical director, one set of protocols, and one reporting system for all providers. The proposals shall be turned into the Auditor's office by Friday, May 25, 2018. Mark Bacon seconded. All in favor. Motion carried.

Bruce Levi made the motion to adjourn. Mark Bacon seconded. Motion carried.

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Paul Wilkinson Chairman

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Mark Bacon

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Bruce Levi

ATTEST:

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Jodi Harr, Auditor