Lumberton Emergency Squad 2022

End of Year Operations Report

Lumberton Emergency Squad Year End Report 2022

Lumberton Emergency Squad (LES) and our community are still seeing the impact of COVID-19. While mandatory mask mandates have been lifted, LES continues to keep safety at the forefront of our organization. At a minimum, we still wear surgical masks for every call. We want to ensure the safety of our crews and patients during this difficult time.

LES is dedicated to maintaining a stringent field training program. We welcome students to train and hone their skills. Significant amounts of hands-on training after EMT school is important to ensure the residents of Lumberton receive the highest level of care and compassion on every call. We stress the importance of empathy and respect, so every patient feels safe, secure, and heard. Our organization retains an EMT instructor and a full-time field training officer on staff, allowing us to train more students and hold classes at the station to pursue further education credits.

Patient care remains our top priority. Patients are more critical and have been waiting longer to call 911 until they are extremely sick. A quick response from skilled EMTs is essential. This is why it is critical to have an in-station response. LES is fortunate enough to have a fully staffed ambulance 24/7, with an additional power truck running 9am-5pm during the week. Our dedicated staff is committed to patient care and has been assisting Tabernacle Rescue Squad. We have been staffing a 6am-6pm truck during the week in Tabernacle to help support those who call 911. With reimbursement so low we need the volume of calls to be able to survive. Unfortunately, EMS has become more of a business than a volunteer opportunity. LES used to rely primarily on volunteers, but now we only have a few volunteers left. In order to retain our trained staff, we had to switch to a career plan. A large number of stations across the state and nation are experiencing significant staffing challenges. In order to retain staff and make EMS a career, I have been working with state representatives to create new legislation to make EMS an essential service similar to Police and Fire. If EMS was considered essential it would provide a better chance for EMTs to receive a livable wage, pension or 401K and health benefits, allowing people to make this profession a career. Billing income alone can't sustain EMS. There has not been an increase in billing reimbursements in years. As you are all aware, cost of goods, fuel and salaries has risen dramatically all while billing reimbursement remains the same. I have also been working with Congressmen Kim's office to create an EMS grant funding source for EMS just as fire currently has the 400 million dollar AFG grant. We have current bills in the Assembly and the Senate to increase the reimbursement for NJ Medicaid from $58.00 to $200.00. Thankfully, these all are bipartisan bills. They have both passed their respective health committee and are now moving on to the budget committee.

On average, EMTs stay in this field for approximately 1-2 years until they move on to other professions within the medical field. LES had been impacted by high turnover rate, with a large portion of college students not returning during the COVID-19 pandemic. LES has made significant strides in staff retention by transitioning to a paid staff. In addition, the camaraderie among the crew makes LES the place students look to work after they complete their training. We hope to continue to expand our benefits in the new year to give back to the hardworking staff.

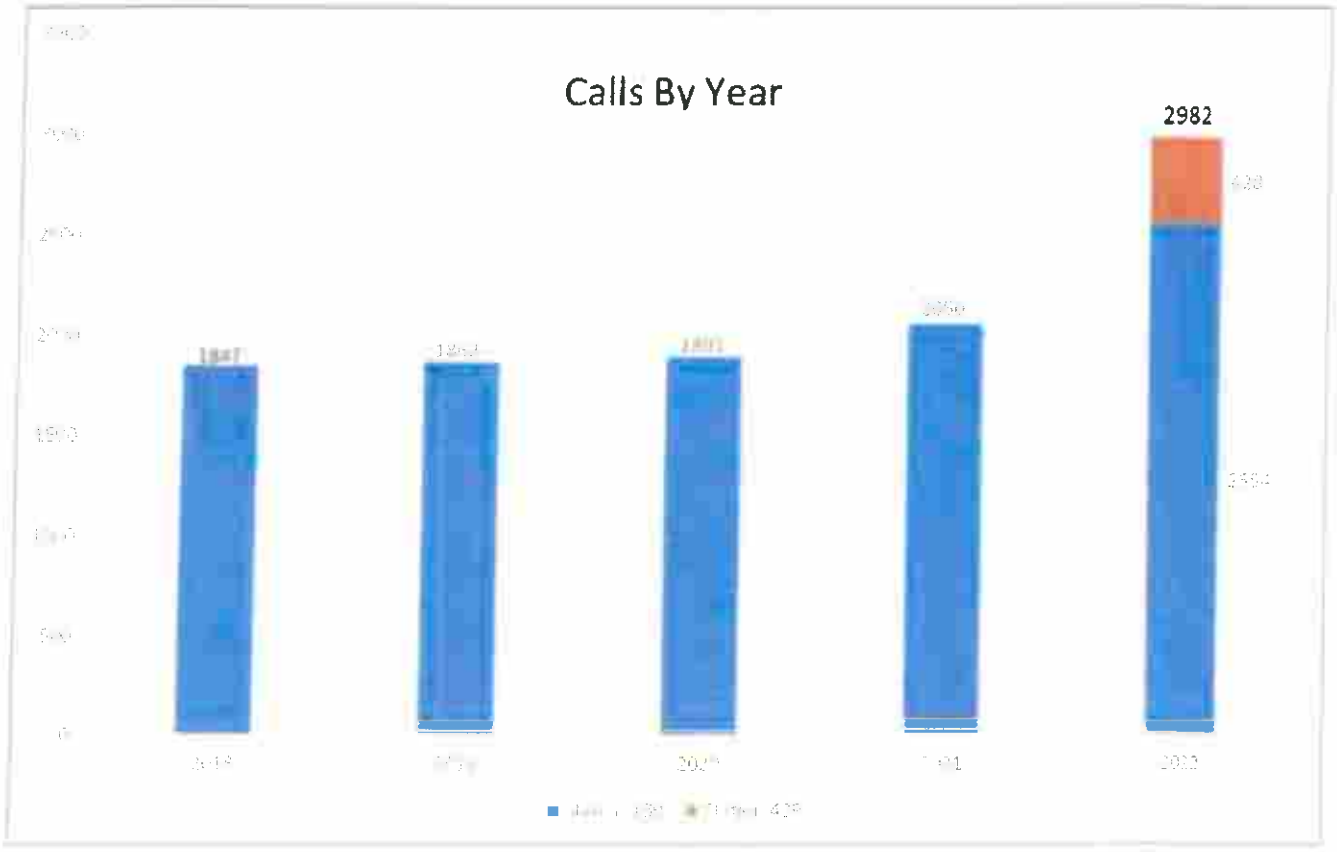
We believe it is important to uplift the community we serve. LES has been involved in numerous township events over the course of the year, including but not limited to National Night Out, summer food truck events, Halloween Extravaganza, and the Santa Ride Along.We provide an ambulance 4 times a year for the police for their

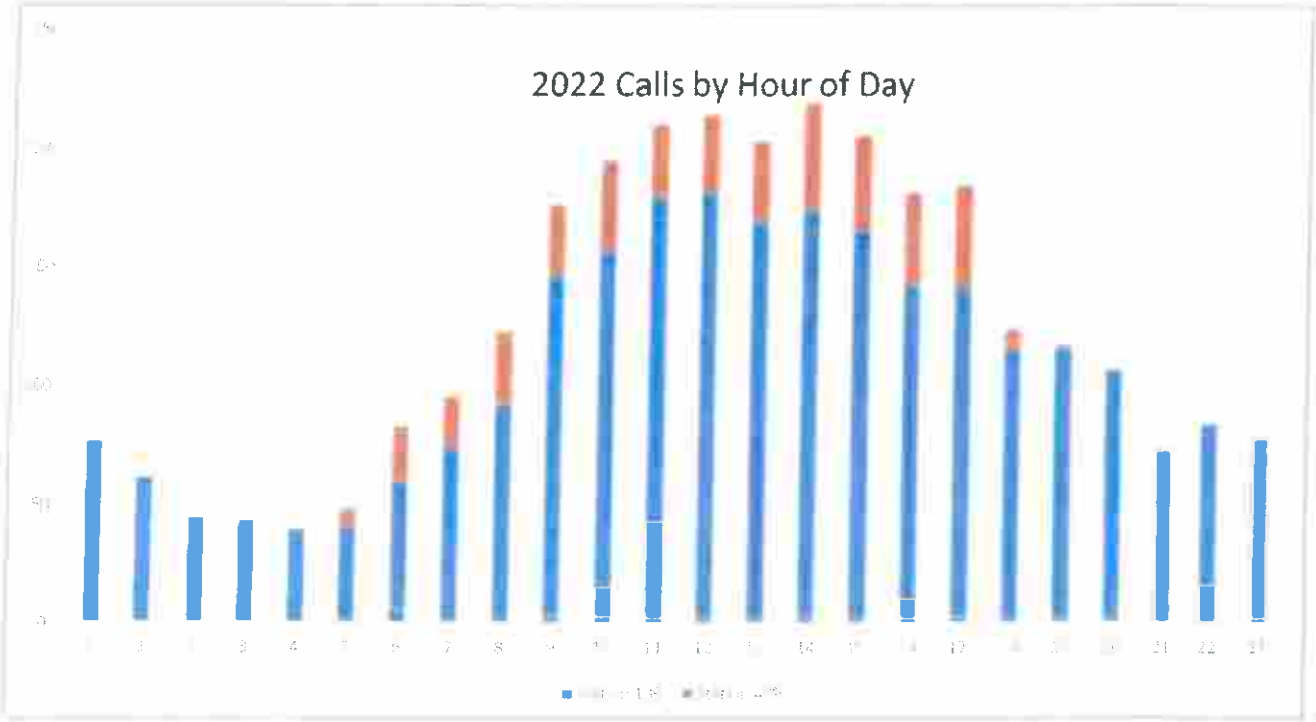
requalification at the shooting range. We also provide standby support for the Glenayre Horse Show. LES has been involved in several food donations to Beacon of Hope and coordinated a large clothing and supplies drive for the center prior to the holidays every December. After responding to several homes in need of food, LES brought food donations to our residents and assisted families in registering for Meals on Wheels. We build a rapport with our patients and intermittently complete well-being checks on at-risk residents. At LES, we recognize our ability to help extends beyond the inside of an ambulance.

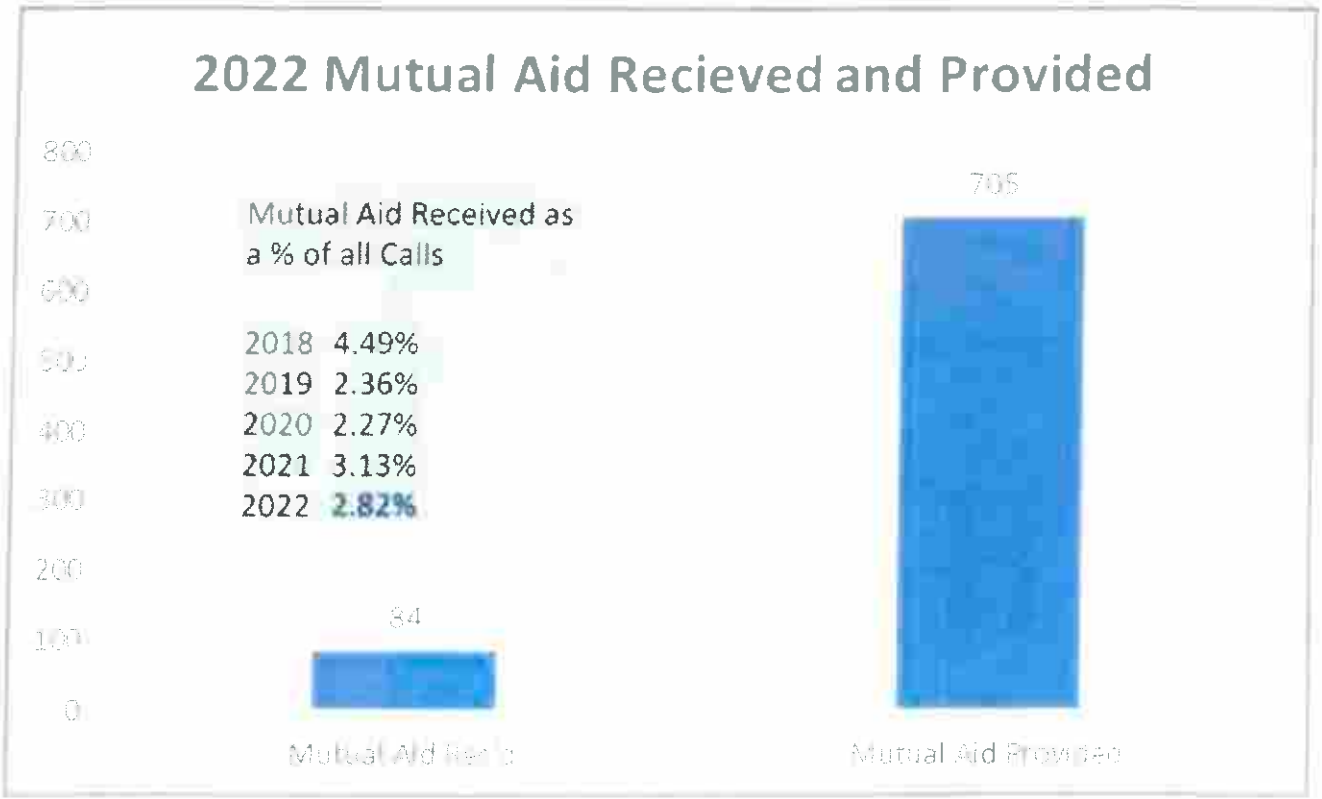
I am still the Health and Safety Officer for Lumberton Township. I continue to monitor and update township employees on the changing CDC guidelines. LES provides education on what qualifies as exposure, quarantine timelines, and provides recommendations to protect employees from COVID-19 in the workplace. To date, 65 employees have been screened. LES has worked diligently to secure rapid COVID tests and necessary resources to continue to keep its employees, township staff, and patients safe. Unfortunately, COVID-19 will continue to be a part of our lives for the near future.

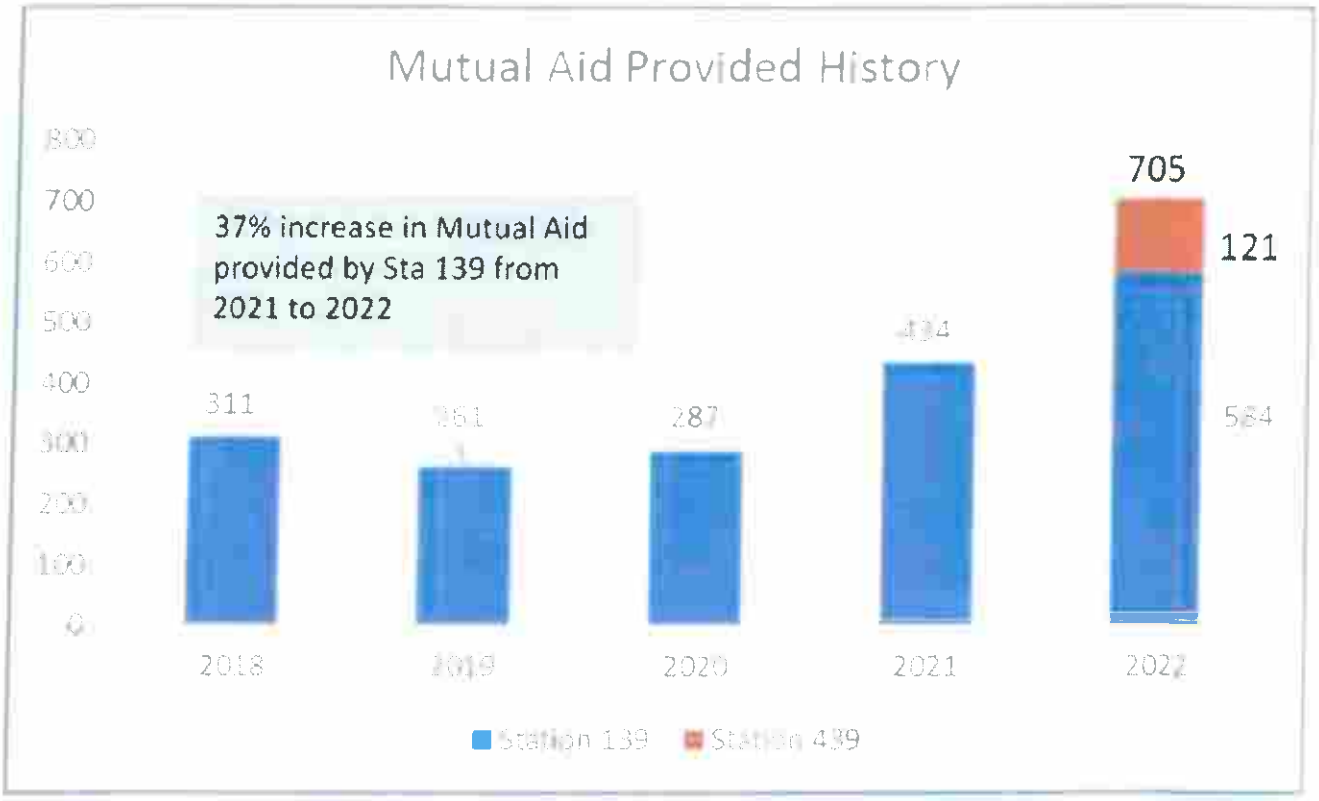
While there are no simple solutions to the obstacles EMS faces, LES is proud to serve the Lumberton community with smiling faces. LES remains steadfast in our commitment to the residents of our town through continued training and recruitment in order to preserve the high level of professionalism and patient care provided by Lumberton Emergency Squad.

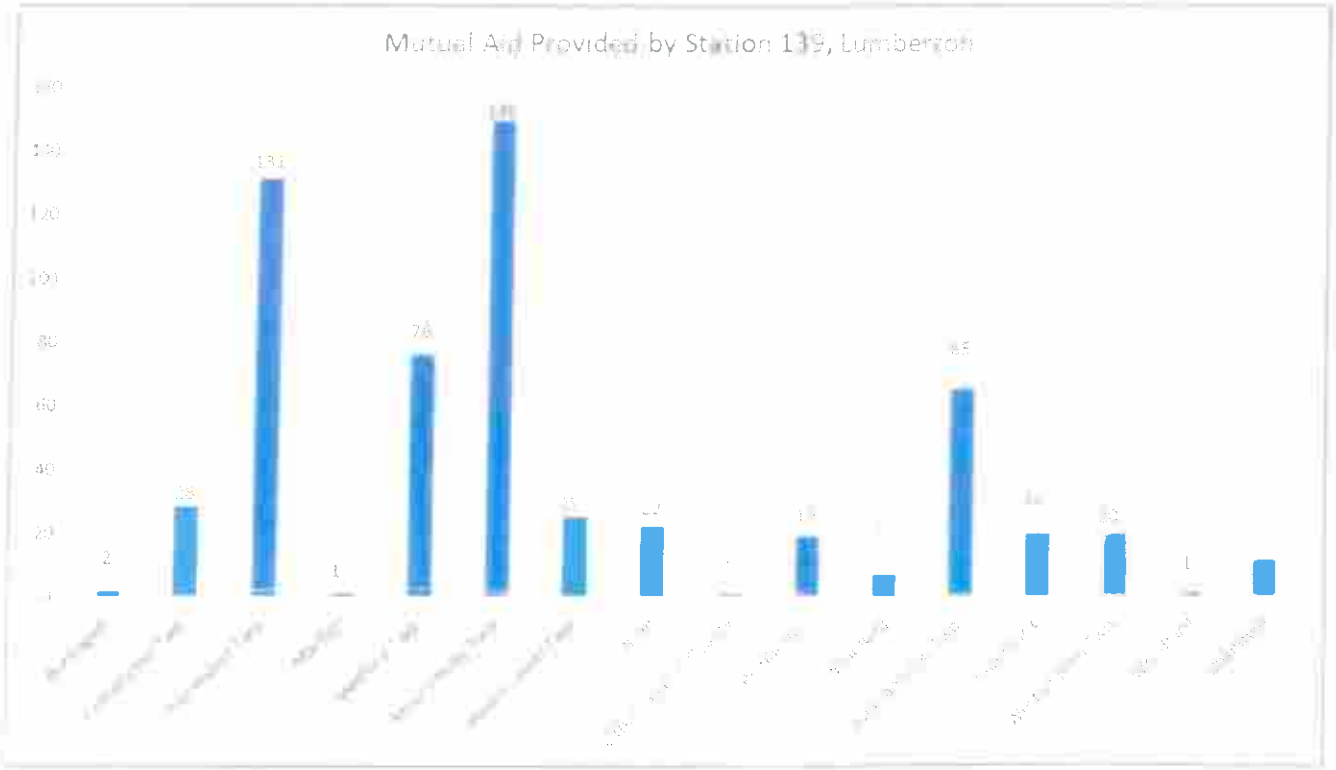
Jamie Wood
Chief Lumberton Emergency Squad

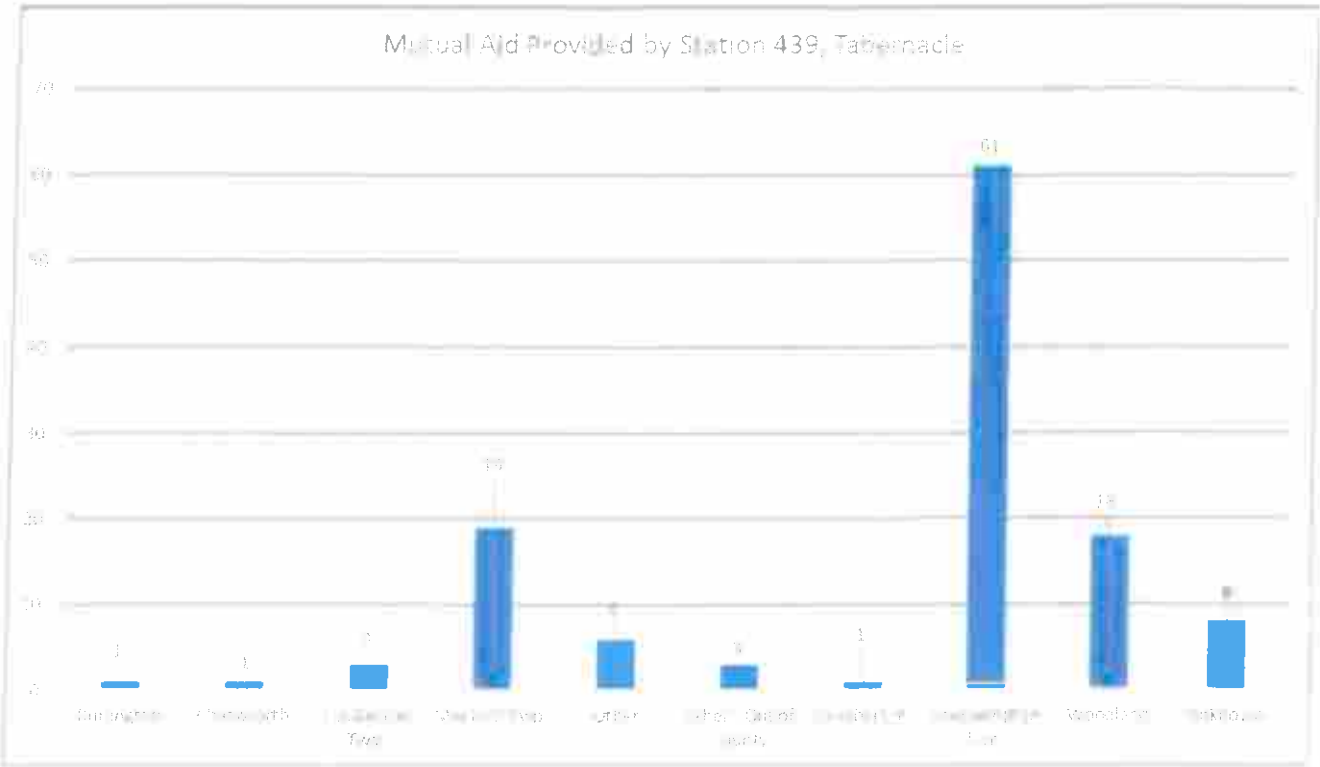

Calls By Year
2982


2022 Calls by Hour of Day


2022 Mutual Aid Recieved and Provided
800
700
600
500
400
300
200
100
0
Mutual Aid Received as
a % of all Calls
2018 4.49%
2019 2.36%
2020 2.27%
2021 3.13%
2022 2.82%
84
705
Mutual Aid Provided


Mutual Aid Provided History
800
700
600
500
400
300
200
100
0
37% increase in Mutual Aid provided by Sta 139 from 2021 to 2022
311
361
287
434
705
121
584
2018
2019
2020
2021
2022
Station 139
Station 439


Mutual Aid Provided by Station 139, Lumberton



Response Times 2022

Dispatch to Enroute

Time Frame (Mins)	Count	Percentage
0-1	1786	63.29%
1-2	816	28.92%
2-3	193	06.84%
3-4	18	0.18%
4-5	5	0.07%
5-6	2	0.00%
6-7	0	0.00%
7-8	0	0.00%
8-10	0	0.00%
10-15	1	0.04%
Above Max Range	1	0.04%

Count 2822

Average	1.10
Average (15 Min Cap)	1.74
Min	0.00
Max	24.00

2022 Calls by Medical Category

Row Labels	Count	Percentage
Medical Emergency	975	32.70%
Fall Victim	320	10.73%
Psychiatric Problems	224	7.51%
Traffic Accident	202	6.77%
Breathing Problems	184	6.17%
Cardiac Emergencies	145	4.86%
Unconscious / Fainting	130	4.36%
Lift assist	87	2.92%
Stroke/CVA	71	2.38%
Abdominal Pain	71	2.38%
Convulsions / Seizure	66	2.21%
Fire Call	56	1.88%
Assault	48	1.61%
Diabetic Problem	47	1.58%
Cardiac Arrest	46	1.54%
Chest Pain	44	1.48%
Back Pain	40	1.34%
Not Applicable	28	0.94%
Hemorrhage/Laceration	24	0.80%
Unknown Problems	22	0.74%
Allergic Reaction	16	0.54%
Traumatic Injury	15	0.50%
Overdose	14	0.47%
Stand By	12	0.40%
Trauma, Head Injury	10	0.34%
Overdose (Suspected Heroin / Opiate)	9	0.30%
Headache	8	0.27%
MCI (Mass Casualty Incident)	7	0.23%
Overdose (other)	7	0.23%
Animal Bite	6	0.20%
Overdose (Suspected Alcohol)	6	0.20%
Other - Transport	5	0.17%
Choking	5	0.17%
Pregnancy / Childbirth	5	0.17%
Trauma, Blunt	4	0.13%
Heart Problems	4	0.13%
CO Poisoning / Hazmat	3	0.10%
Stab/Gunshot Wound	2	0.07%
Flu-Like Symptoms	2	0.07%
Sick Person	2	0.07%
Burns	2	0.07%
Industrial Accident	2	0.07%
Heat/Cold Exposure	2	0.07%
Eye Problem	2	0.07%
Ingestion/Poisoning	1	0.03%
Drowning. Fresh water	1	0.03%
Grand Total	2982	**100.00%**

2022 Calls by Outcome

Row Labels	Count	Percentage
Transported By BLS (3201)	1107	37.12%
Transported By BLS, ALS Treat (3202)	480	16.10%
Transported By BLS, ALS Cancelled SNN (3205)	255	8.55%
Patient Assessed, Pt. Refused Transport-Medical (23933)	190	6.37%
Cancelled - Enroute (1945)	131	4.39%
Public Assist Only (23937)	126	4.23%
Mutual Aid dispatched Immediately. (28468)	84	2.82%
Cancelled - On Scene, No patient contact (1943)	79	2.65%
Refusal By Action patient refused assessment (30208)	75	2.52%
Transported By BLS, ALS Canceled Due to Proximity (23930)	62	2.08%
Cancelled - Prior to Response (1944)	49	1.64%
Transported By BLS, ALS Not Requested Due to Prox. to Hospital (23929)	47	1.58%
Canceled By Police Department (23935)	47	1.58%
Patient Assessed, Pt. Refused Transport-Auto (24158)	37	1.24%
Patient Refused - Assessment Completed at Discretion of BLS (29679)	27	0.91%
Transported By BLS, ALS Triaged to BLS (23924)	26	0.87%
Error in dispatch (28470)	21	0.70%
Fire Call (24131)	20	0.67%
Lift Assist Only- Patient Refused Care AMA (30207)	20	0.67%
Stand By - No Patient Contact (23928)	18	0.60%
Assist Unit on Location (25938)	18	0.60%
Diverted to another call (36650)	15	0.50%
Dead At Scene - Not Pronounced (23925)	10	0.34%
Pronouncement (2135)	9	0.30%
Handled by other crew (38562)	7	0.23%
Transported By BLS, ALS Requested but Unavailable (30210)	7	0.23%
Treated By BLS, Transferred to Air Medical Unit (23932)	6	0.20%
Transported By BLS, ALS Unavailable (23931)	4	0.13%
Canceled By Fire Department (25751)	3	0.10%
Treated, Transferred Care to other EMS (30211)	2	0.07%
Grand Total	**2982**	**100.00%**