



Helping Communities to Help Themselves



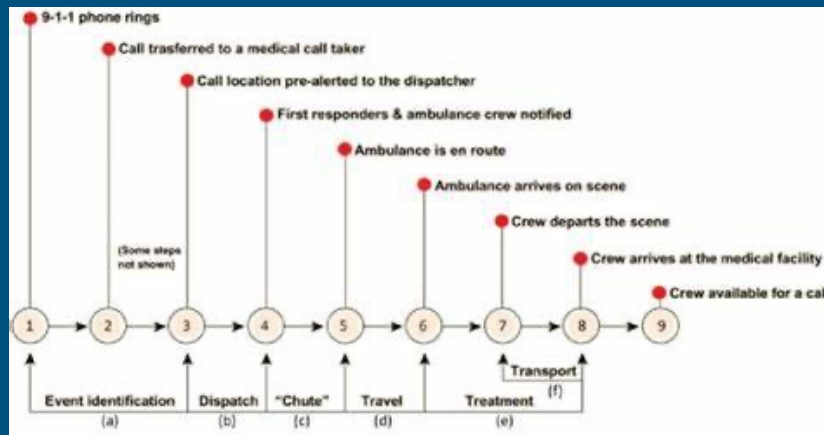
Pennington Borough Emergency Medical Services

Emergency Medical Services

- Started mostly as civilian rescue squads and hospital-based Basic Life Support (BLS) – Increased Post WW2
- 1960's-1970's Birth of Modern EMS / Standardization of Training
- 1980's Funding Switched from Federal Funding to Community State Block Grants
- New Jersey Department of Health (DOH)
- EMS calls Increase as the population increases

Emergency Medical Services

- Emergency Medical Services (EMS) systems provide an immediate response to both emergency and non-emergent medical emergencies. The service provided by these agencies is essential in starting medical care and ultimately saving the lives of residents within our communities.



Why Are We Here?



Challenges And Trends

- Increase in demand for service
- Increased workload for members to be trained
- Economic(Workforce Shortage / Financial Decrease)
- Community growth(Changes / Development)
- Abuse of the 9-1-1 system
- Possibility of contagious illness
- Agency funding / community support
- Loyalty
- Agencies competing for the same workforce



Institute of Medicine Study Pre-Hospital Care Finding-2006

- Insufficient coordination
- Disparity in response times
- Uncertain quality of care
- Lack readiness
- Lack professional identity
- Lack of mandates
- Supervision of local EMS

Workforce Challenges

- Inadequate compensation
- Difficult working conditions (Extended Shifts / Call Volume)
- Variation of training requirements (Non-Uniform Industry State to State) leads to fragmentation and variations in the delivery of emergency medical services.
- The pool of available EMT's
- Competing agencies



MONMOUTH COUNTY SHERIFF'S OFFICE SHERIFF SHAUN GOLDEN EMERGENCY MEDICAL SERVICES

**NOW
Hiring**
MEDSTAR IS EXPANDING
HIRING AN ADDITIONAL FULL-TIME EMTs AND PART-TIME EMTs
Full Time \$55,000
Per Diem \$28.50/hr

WE OFFER

- Competitive Salary
- 36 Hour Work Week for FT
- Paid Vacation
- Enrollment in (PERS) Pension
- Paid Training
- Benefits
- Continuing EMT Education Provided At No Cost



JOB REQUIREMENTS : MUST BE CERTIFIED EMT

MEDSTAR

WALL TOWNSHIP EMS

WE ARE HIRING

PART-TIME EMTs

REQUIREMENTS
-VALID N.J. DRIVER'S LICENSE
-CERTIFIED EMT-B
-HIGH SCHOOL DIPLOMA
OR EQUIVALENT
-BLS/CPR CARD
PREFERRED
-CEVO
-ICS100, 200, 700, 800
-1 YEAR EXPERIENCE

ALL CEU TRAINING PROVIDED

Starting at \$25 an hour

Wall Township EMS is a division of the Wall Township Police Department and provides 24/7/365 Emergency Medical Services across 32 square miles of Wall Township and surrounding municipalities

APPLY ONLINE AT WALLPOLICE.ORG/CAREER

LAKEWOOD TOWNSHIP EMS IS HIRING

PART TIME & FULL TIME EMT

REQUIREMENTS: VALID NJ EMT OR PARAMEDIC CERTIFICATION
MUST POSSESS VALID DRIVERS LICENSE AND CPR CERTIFICATION
MUST BE 18 YEARS OF AGE

AVAILABILITY FOR NIGHTS, WEEKENDS, & HOLIDAYS

NEWLY CERTIFIED EMT REIMBURSEMENT

PART TIME:
COMPETITIVE PAY
& EDUCATIONAL
COMPENSATION



SCAN TO APPLY
TODAY



LAKEWOODNJ.GOV/DEPARTMENT/EMS

**FULL TIME
STARTING SALARY:
\$43K, MEDICAL
BENEFITS & PTO**

EMPLOYMENT OPPORTUNITY



Florence Township Fire District No.1
Division of EMS

Contact:

Robert Tharp
Fire District Administrator rtharp@ftfd40.org

609-499-1393

Christopher Parks
EMS Chief cparks@ftfd40.org

If interested in joining our team, please scan the QR code, fill out the application and email your completed application with a copy of your resume

ABOUT US:

We are actively looking to add dedicated and passionate individuals to join our EMS Division. We are looking to fill multiple per-diem EMT positions to provide exceptional care to our community. If you are committed to making a difference and want to be part of a dynamic team that values professionalism and compassion, we encourage you to consider joining us in this rewarding and impactful role. Your contribution to our team will help us ensure the safety and well-being of the residents we serve.

Actively hiring for Per-diem EMTs

(Per-diem employees are eligible to be placed on the list to fulfill future Full-time positions and receive bonus points)

Current Per-diem incentives:

- \$23.00 - \$28.00 (increased hourly rate based on experience and hours worked)
- Paid CEU Education & Refreshers
- Deferred 457 and Roth plans available
- AFLAC
- Permanent shifts available

Requirements:

- Valid NJ/PA EMT or NREMT
- Current CPR card
- NJ Drivers License
- Must be +18 years of age
- High School Graduate or GED



NOW HIRING

STARTING \$59-61K ANNUALLY

LACEY TOWNSHIP EMS



SERVICE - COMMITMENT - INTEGRITY

HEALTHCARE/Rx/DENTAL BENEFITS STARTING IMMEDIATELY
\$10K PARAMEDIC SCHOOL TUITION REIMBURSEMENT
IMMACULATE WELL-APPOINTED HEADQUARTERS
BEST IN CLASS VEHICLES AND EQUIPMENT
UNPARALLELED EMPLOYEE EXPERIENCE
UNIQUE PROGRESSIVE CULTURE
EARNED VACATION TIME

PROSPECTIVE CANDIDATES SHOULD SEND AN EMAIL OF INTEREST TO:

LACEYEMS@OUTLOOK.COM

WE ARE HIRING

FULL-TIME & PER-DIEM

- Full-Time Salary \$51,000-\$72,588
- Peri-Diem Rate \$27.00
- Yearly Step & Contract Raises
- 36 Hour Work Week
- Night Shift Differential for all Employees
- Weekend Shift Differential for all Employees
- Paid Education & Refreshers
- Power Stretchers/Loaders & Lucas Devices
- Uniform Dry Cleaning
- Uniform Allowance

HOW TO APPLY:

<https://www.primepoint.net/Recruitment/#/MCHTWP/displayjob/1003045>



ELIZABETH FIRE EMS DIVISION IS HIRING!



**Emergency Medical Technician
Full Time Day and Night Shifts**

Benefits Include:

- Enrollment in Public Employees Retirement System
- State Health Benefits Program
- Paid Time Off (Vacation, Holiday, Sick, Personal)
- Tuition Reimbursement
- Uniforms (Initial and Replacement)
- Equipment
- Available In-House Training
- Contractual Raises
- Ability to Join NJ EMS Task Force

**MUST BE A U.S. CITIZEN
A NJ CERTIFIED EMT
HAVE A VALID DRIVERS LICENSE
AND VACCINATED**

For More Information:
Richard Biedrzycki
908-527-4529
rbiedrzycki@elizabethnj.org





Volunteer Study

THE SPECIAL TASK FORCE ON VOLUNTEER RETENTION AND RECRUITMENT

Final Report
December 2023



Challenges identified in [Retention and Recruitment for the Volunteer Emergency Services](#), U.S. Fire Administration (May 2023)

- Declining volunteerism
- Aging volunteer fire service
- Training demands
- Unmet expectations
- Work-life-volunteer balance
- Mission expansion into EMS
- Department image and culture
- Sustainable funding sources

Essential Service Vs. Ethical Obligation

- New Jersey is one of 37 states that does not classify EMS as essential.
- Local governments are not required to provide medical service responses to their residents.
- COVID-19
- Emergency medical services represent a fundamental component of the right to health, vital to preserving life and well-being. Recognizing EMS as a human right demands a commitment to universal access, equity, and developing comprehensive and responsive EMS systems.

Essential Service Vs. Ethical Obligation

- Both ethical and practical values should ensure that no one is left behind in times of medical emergency compels us to advocate for the explicit inclusion of EMS within the framework of essential services.

Department of Health Response Time

- Per N.J.S.A. 26:2K-67, the Office of Emergency Medical Services has published EMS response times on the Department of Health's website since 2018. EMS response times are based on National Emergency Medical Services Information System-(NEMIS) defined data elements exported to the NJ EMS data repository by New Jersey MS agencies.

Response Times

- Industry Standard
 - NFPA 1710 (Urban Areas): The goal is for the first EMS unit to arrive on scene within 5 minutes (response time) for at least 90% of calls.
 - NFPA 1720 (Rural Areas): The response time goal is for the first unit to arrive within 14 minutes for at least 90% of calls in suburban and rural areas, given that these areas have longer travel distances.
- Many EMS agencies aim for a response time of 8 minutes or less for emergency calls, with a goal to meet that time 90% of the time.

Response Times Continued

- The World Health Organization also recommends that EMS should aim to reach the scene within 8 minutes.
- The American Heart Association advises that first responders should ideally arrive at the patient within 4 to 6 minutes to deliver high-quality chest compressions and defibrillation.
- The target for EMS response time should be within 8 minutes of the emergency call for at least 90% of patients. This aligns with many EMS standards for high-priority calls, such as cardiac arrest, where early defibrillation is a critical factor in survival rates.

Response Level Of Care Of Th..	County	Percentile (90) of BLS (..	Total Calls ^{4, 5}
BLS-EMT/EMT-Basic	Atlantic	00:11:00	23,317
	Bergen	00:13:56	30,282
	Burlington	00:14:13	6,545
	Camden	00:11:00	10,745
	Cape May	00:10:12	6,338
	Cumberland	00:13:12	3,797
	Essex	00:13:03	73,096
	Gloucester	00:12:04	2,615
	Hudson	00:10:07	26,086
	Hunterdon	00:15:12	3,516
	Mercer	00:13:00	6,519
	Middlesex	00:12:00	34,492
	Monmouth	00:16:48	32,868
	Morris	00:15:06	15,770
	Ocean	00:14:00	28,170
	Passaic	00:19:00	22,007
	Salem	00:16:45	4,596
	Somerset	00:17:05	10,399
	Sussex	00:19:45	3,730
	Union	00:11:38	30,221
	Warren	00:21:12	3,399

New Jersey's Emergency Medical Technicians

2015	15,000
2016	21,052
2017	27,486
2018	29,156
2019	27,143
2020	25,349
2021	22,551
2022	21,740
2023	21,887



Agency Operational Planning

“Strategy without Tactics is the slowest route to victory.” Sun Tzu

Goals

- Develop, implement, and sustain an efficient and effective basic life support service for all residents and visitors of Mercer County municipalities.
- Create a sustainable, cost-effective, essential service that provides life-saving services and can respond to all hazards and transport residents in a timely and reliable manner
- Provide a fully staffed 24/7/365-day service.
- Current agencies should be utilized in the planning, design, and implementation phases.

Agency Operational Planning

- No agency is the same (many are similar, but community needs and cultures vary)
- Once implemented – monitor closely for changes
- The best indicator of future behavior is past behavior
 - Dynamic / Static Planning
- Although we cannot predict the future or random events, we can analyze the data and find recognizable patterns that exist in human activity
- The public has become more reliant and is becoming more educated on Emergency Medical Services
- Accountability

Planning Challenges

- Various models shall be researched, evaluated, and understood before implementation or decision-making. Not all agencies are “Cookie Cutters” and should not be transferred from one agency to another.
- Establish a shared vision of the community needs and intended service delivery with all stakeholders (Elected officials, Administration, Public Safety Officials)
- Building block approach
- Consistent evaluation of implementation /revise as necessary
- At the end of the day these challenges need to be defeated by the administrations.

Health Care Delivery Must Be

- Safe
 - Effective
 - Patient-Centered
 - Timely
 - Efficient
 - Equitable
-
- Review–Evaluate–Revise

Emergency Medical Service Options

- Municipal Based
 - Volunteer, Career or Combination
 - Fire Department Based EMS
 - Police Department
 - Independent Entity
 - Municipal Shared Service
- Private Agency
 - Hospital-Based or BLS Provider
- County / Regional Based Provider

Municipal Based Service Pro's

- Local Control
- Customization
- Community oriented
- Integration with community and public safety partners
- Community accountability and transparency
- Consistency in service delivery

Municipal Based Service Con's

- Operating costs
- Resource capability
- Recruitment and retention
- Possible service inconsistencies
- Economies of scale (Feasibility Region Dependent)

Municipal Based Service Summary

- A municipal EMS system can provide significant advantages, especially in terms of local control, community accountability, and the ability to customize services to meet a municipality's unique needs. It can also enable more integrated care within the local emergency services network and ensure a consistent level of service.
- However, operating the system can be costly, and municipalities may encounter challenges related to resource limitations, staff recruitment and retention, and the ability to scale services during periods of high demand. Smaller municipalities may also find it difficult to secure funding and maintain infrastructure, and budget pressures can lead to service interruptions.

Municipal Based Service Summary

- A municipal EMS system must thrive by implementing strong financial management, effective staffing practices, and a clear commitment to maintaining service quality, even amid fiscal constraints. Ensuring equitable coverage and sustaining operations will require meticulous planning and ongoing community support.
- Administrators must also be prepared to address the financial and operational challenges of managing a crucial public service like EMS, taking proactive measures to ensure sustainability and growth as the community's needs evolve.

Municipal Shared Service

- Committing to a municipal shared-service EMS system involves a cooperative model where multiple municipalities or neighboring jurisdictions pool resources and collaborate to provide emergency medical services. This system can increase efficiency, reduce costs, and improve service delivery, but it also requires careful planning and coordination.

Private Partnership Pro's

- Possible cost savings
- Specialized resources
- Out sourced all responsibilities of operations

Private Partnership Con's

- Loss of oversight and control / standards
- Profit motive Vs. public health
- Service Disruption(Reliability)
- Complex contracts and accountability

Private Partnership Summary

- A partnership between your municipality and a private company or hospital for BLS ambulance services may provide cost savings, enhance efficiency, and offer access to specialized expertise. However, it also necessitates careful consideration of potential risks, including loss of control, service quality, and the need for diligent oversight and contract management. Public safety and administrative officials must balance cost concerns with service quality and the community's health needs to ensure that the partnership is both effective and appropriate sustainable.

County Based Service or Regional Pro's

- Resource allocation
- Shared resources
- Consolidation
- Improved coverage
- Cost savings
- Standardization of care

County Based Service or Regional Con's

- Loss of Local Control
- Coordination
- Service Distribution
- Inequities
- Availability / Buy - In from County Officials

County Based Service or Regional

- A county or regional-based EMS system can offer significant benefits, particularly regarding resource efficiency, improved coverage, and cost savings. However, the system can also face challenges, including losing local control, potential bureaucratic complexity, and difficulties ensuring equitable service for all areas. For the system to be successful, it requires careful planning, effective coordination, and a balanced approach to addressing both urban and rural needs, as well as adequate funding and transparent governance to ensure fairness and quality service delivery across the entire region.



Case Study – Success Story



Thank You



New Jersey Department of Community Affairs
Division of Local Government Services
Local Assistance Bureau
Office-609-913-4418





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