

City of Baltimore

City Council City Hall, Room 408 100 North Holliday Street Baltimore, Maryland 21202

Legislation Text

File #: 21-0163, Version: 0

Explanation: Capitals indicate matter added to existing law. [Brackets] indicate matter deleted from existing law.

* Warning: This is an unofficial, introductory copy of the bill. The official copy considered by the City Council is the first reader copy.

Introductory*

City of Baltimore Council Bill

Introduced by: Councilmember Burnett

A Bill Entitled

An Ordinance concerning

Study and Report: Evaluation of the Emergency Medical Services System

For the purpose of requiring the Baltimore City Fire Department to submit a report to the Mayor and City Council evaluating the Department's current Emergency Medical Services (EMS) delivery model and exploring the creation of an EMS bureau in the Baltimore City Fire Department; and providing for a special effective date.

Section 1. Be it ordained by the Mayor and City Council of Baltimore, That:

- (a) No later than 150 days from the enactment of this Ordinance, the Baltimore City Fire Department, in consultation with the City Administrator or the City Administrator's designee and the Bureau of Budget and Management Research, shall submit a report to the Mayor and City Council setting forth a comprehensive evaluation of the cost and feasibility of establishing an EMS bureau to be led by an assistant chief of the Baltimore City Fire Department, and to be supported by 2 EMS deputy chiefs.
- (b) The report shall include:
 - (1) a breakdown of:
 - (i) the total number of personnel holding emergency medical technician or paramedic certifications that are assigned to the EMS Division;
 - (ii) the total number of full-time and peak medical transport units the Department has in service daily; and
 - (iii) the protocols used to determine if the critical alert medic unit is placed in service;
 - (2) a projection of the staffing and operational cost requirements to transition all of the Department's peak medical transport units to full-time units;
 - (3) the total number of calls for service received by the Department over the last 7 years, broken down between medical responses and fire responses;

- (4) the total number and percentage of low-acuity medical calls for service, in comparison to advanced life support calls for service, that the Department has received over the last 7 years;
- (5) an assessment of what impact, if any, the use of the current two-tiered structure and the medical duty officer have had on reducing the call volume in the EMS system;
- (6) a comprehensive review of the strengths and weaknesses of the Mobile Integrated Health Community Paramedicine pilot program, including proposed recommendations to fully implement and expand the program citywide with other healthcare systems;
- (7) a comparative study of 5 fire departments that currently use some model of alternative nonemergency transportation, including, but not limited to:
 - (i) ride-share programs;
 - (ii) medic buses; and
 - (iii) medical chase cars;
- (8) a 5-year estimate of funds that were not reimbursed by the Center for Medicare and Medicaid Services due to federal statutory restrictions governing EMS for alternative handling of 911 calls, and recommendations on legislative proposals that need to be examined to address this funding gap;
- (9) a comprehensive evaluation of at least 3 jurisdictions that are currently using their fire department as the lead agency to handle 911-diverted responses to behavioral and mental health crisis resources, and a draft proposal to include a cost and feasibility report on how a comparable program could be developed and implemented in Baltimore City; and
- (10) an evaluation of:
 - (i) the Department's full-time data and performance management program;
 - (ii) how the program is used to monitor Departmental operations for resource allocation and deployment strategies; and
 - (iii) if a modern data and performance management program does not exist, a comprehensive plan on the time line and steps that will be required to implement one.

Section 2. And be it further ordained. That this Ordinance takes effect on the date it is enacted.