

Good Morning Committee Members:

I am Frank Jannetti, Director of Mercer County's Department of Public Safety. The Mercer County Department of Public Safety is comprised of the Mercer County Emergency Management Agency and the Mercer County 9-1-1 Center, and I am the Director of both for the County. I also serve as the Vice-Chair of the Southwest PA Counter Terrorism Task Force, also known as Region 13. As a field responder, I am the Police Chief in Wampum Borough, Lawrence County and the Deputy Fire Chief for the North Beaver Volunteer Fire Department, also in Lawrence County.

In Mercer County, ambulance services are chosen by the municipalities and responses are based on the service, or rotation of services that the municipality chooses to respond. For example, a municipality may choose two or more services to handle calls within their jurisdiction...and the 9-1-1 Center's computer aided dispatch system will choose the rotation based on which service received the last call. In municipalities where only one service is chosen, that service receives all EMS calls within that jurisdiction. If that service is not available, the 9-1-1 dispatcher will choose the next closest, or next available, service to handle that particular call. It should be noted that Mercer County has 48 municipalities, so there are basically 48 response plans for EMS related calls in the County. In addition to 9-1-1 calls where EMS is requested due to a medical call, there are also EMS related responses for Fire Department incidents such as Structure Fires, even when no medical issue exists, known as "Fire Stand By" calls. There are also numerous other times where EMS is dispatched in the County, such as Mental Health transports, lift assists, motor vehicle accidents (whether or not an injury is known), body removals for the Coroner's Office, and others.

The issue of Emergency Medical Services (EMS) response in Mercer County has been present throughout my entire 18 years as the Director of Public Safety. When I first took over as the Director, in 2004, Mercer County had very few instances where Ambulances were not readily available to handle calls. Since that time, the availability of EMS resources has dwindled dramatically, not just in Mercer County, but throughout our contiguous counties (Trumbull, Crawford, Butler, Venango, Lawrence) as well. In the very rare cases where we would run out of resources before, we could contact one of our contiguous counties and they would be able to provide us resources to stand by or respond to our County. Now today, in 2022, those counties are experiencing the same or worse shortages that we have...and they are often requesting support from us. There are many times when we are down to one, or zero, ambulances in our entire County. It is important to note that Mercer County has a surface area of 683 square miles, with over 45,000 households.

Realizing the issue of the availability of resources, we developed the Mercer County Pre-Hospital Care Council (MCPHCC) in 2007. The MCPHCC was created to look at EMS availability in the County and find ways to improve our situation, because there were many instances where it was taking over 20 minutes to get an ambulance to an emergency in our County. The MCPHCC developed a plan where, if an agency went out of service, they would contact another agency within the County and ask if they had resources available to stage an ambulance near their geographic location to "stand by" until they got an ambulance back in service. The 9-1-1 Center would continue to dispatch the rotation ambulance but the "stand by" ambulance may be the one responding instead. This program worked out very well for a time, but started to fall apart a few years ago due to endless transports to out of town hospitals such as Pittsburgh area medical facilities...along with other issues. It became problematic that "stand by" services were handling more calls within the jurisdictions than the rotation ambulance...and it was also

taking the “stand by” ambulance out of their own jurisdiction, thus depleting their resources as well. Therefore, the plan failed, so the services are back to contacting the 9-1-1 Center and reporting “out of service” when they have no ambulance to respond to calls within their rotations or jurisdictions.

The Mercer County EMS services are professional and excellent at their jobs, but they are also in business to handle calls, so having an ambulance sitting on station, or posting in the field, waiting for a 9-1-1 response is difficult to justify for business related reasons. The 9-1-1 center has no effective way of knowing where ambulances are physically within the County at any given time. They are constantly moving between medical facilities, nursing homes, and other contractual or private calls they receive. The 9-1-1 Center has no way of knowing if a service is down to ONE available ambulance...so we may be sending our last available resource to a NON-life threatening call rather than saving that unit in case a life threatening call comes in. Currently, the 9-1-1 dispatcher receives a call and dispatches it to the appropriate service based on rotation...regardless of level of response, or the emergent nature of the call.

There have been numerous occasions in the past...and it is becoming more and more frequent, where an emergency call is dispatched and it is eventually determined that the dispatched unit is not able to handle the call, thus tasking the 9-1-1 center with determining who else to send. When we contact that service, they may also be unable to assist...and it may take precious seconds or even minutes to get an ambulance on the road. The Fire Departments that are certified to run medical calls (called QRS services) are helpful, but they are also often volunteers, and can't always respond or may only be able to have a crew at certain times. Therefore, it might take more than 20 minutes...up to as much as 35-40 minutes to get an ambulance to a life-threatening call. The EMS act permits us to respond a NON-certified Fire Department to assist ONLY for a **cardiac arrest, motor vehicle accident or lift assist**. Otherwise, only CERTIFIED EMS agencies may respond to EMS calls.

We MUST establish a sustainable EMS system where ambulances are available for 9-1-1 calls and emergencies when life threatening medical conditions are present. In addition, we must stop the practice of using EMS resources for NON-medical responses, which depletes our resources and makes the job of our 9-1-1 centers considerably more difficult in finding available resources to assist patients with life threatening issues. Patient's lives are in jeopardy when ambulances are out of service due to non-emergency transports and non-medical calls when a real world, life threatening emergency occurs.

Thank you for the opportunity to testify today.