

The background features a dark blue gradient on the left that transitions into a bright, glowing blue tunnel-like structure on the right. The tunnel is formed by numerous thin, curved lines that create a sense of depth and movement, leading the eye towards the right side of the frame.

MEDCOM and SECC

A PATH FORWARD
EXECUTIVE SUMMARY OF THE SECC/MED-COM REPORT
SEPTEMBER 2023

MEDIC Future Direction

- New County Department: January 1, 2024
 - Provides Access to Additional Funding Sources
 - Ensures Future of EMS for all of Scott County
- Questions and Issues
 - Onboarding of Medic Employees
 - Financial Integration
 - Dissolving existing 501c3
 - County Medic Transition Group
 - What about MED-COM? Should we consolidate with SECC?

What about MEDCOM?

- Should SECC and MEDCOM Consolidate?
 - First considered when SECC was formed
 - Seems like another logical point to ask the question – considered it when SECC was formed
 - Partner Agencies Expect It – Don't see any reasons why not
- Our Process for Considering that Question
 - MEDCOM / SECC Group
 - Brainstorm Issues/Pros/Cons
 - Engage with ALL Staff of both Organizations
 - Engage with our Partners

Our Findings – What We Learned

(And what everyone needs to understand about the issues)

- Issue of potential consolidation is very complex
- SECC and MED-COM are both dispatch, but very different
- Many different ways to accomplish EMS dispatching – varies widely
- MED-COM processes are highly integrated and mutually dependent on MEDIC ambulance operations. Removing MED-COM could create gaps
- SECC and MED-COM use different Computer Aided Dispatch systems. Each system is tailored to the organizations unique needs. CAD integration or a common CAD needs additional study.

Our Findings – What We Learned

(And what everyone needs to understand about the issues)

- Based on anecdotal information, it would appear that a significant portion of employees from both organizations are not in favor of or concerned about consolidation.
- One of the prospective advantages of consolidation, cross training a larger pool of employees has challenges and would take significant time to accomplish.
- Partner agencies have a vested interest in the future of EMS dispatch. There are no guarantees that consolidation would solve any perceived issues. We continue to work with those partners on achieving their goals.

Our Findings – What We Learned

(And what everyone needs to understand about the issues)

- Most involved in the analysis believe that there are probably advantages to consolidation – much disagreement and uncertainty about “what” should be consolidated. Need more study.
- Confidentiality and information security – HIPAA and NCIC
- The current structure and processes for EMS dispatch are somewhat unique. The current processes and the use of EMD work well.
- All SECC Telecommunicators are represented by the Iowa Public Safety Dispatchers Union (IPSDU)

Recommendations – Short-term (0-24 months)

- MED-COM onboards as part of the new County Dept. Jan. 1, 2024
- Implement Cost Accounting tools to recoup dispatch expenses
- Continue SECC/MED-COM Working Group:
 - ID and implement process improvements
 - Submit additional recommendations for process consolidations (if any)
 - Report to SECC Board, TAC and Scott Co Board of Supervisors
- Improve interoperability between two CAD systems. High Priority.
- Continue efforts to analyze call processing data. Look for improvements and causal effects.

Recommendations – Short-term (0-24 months)

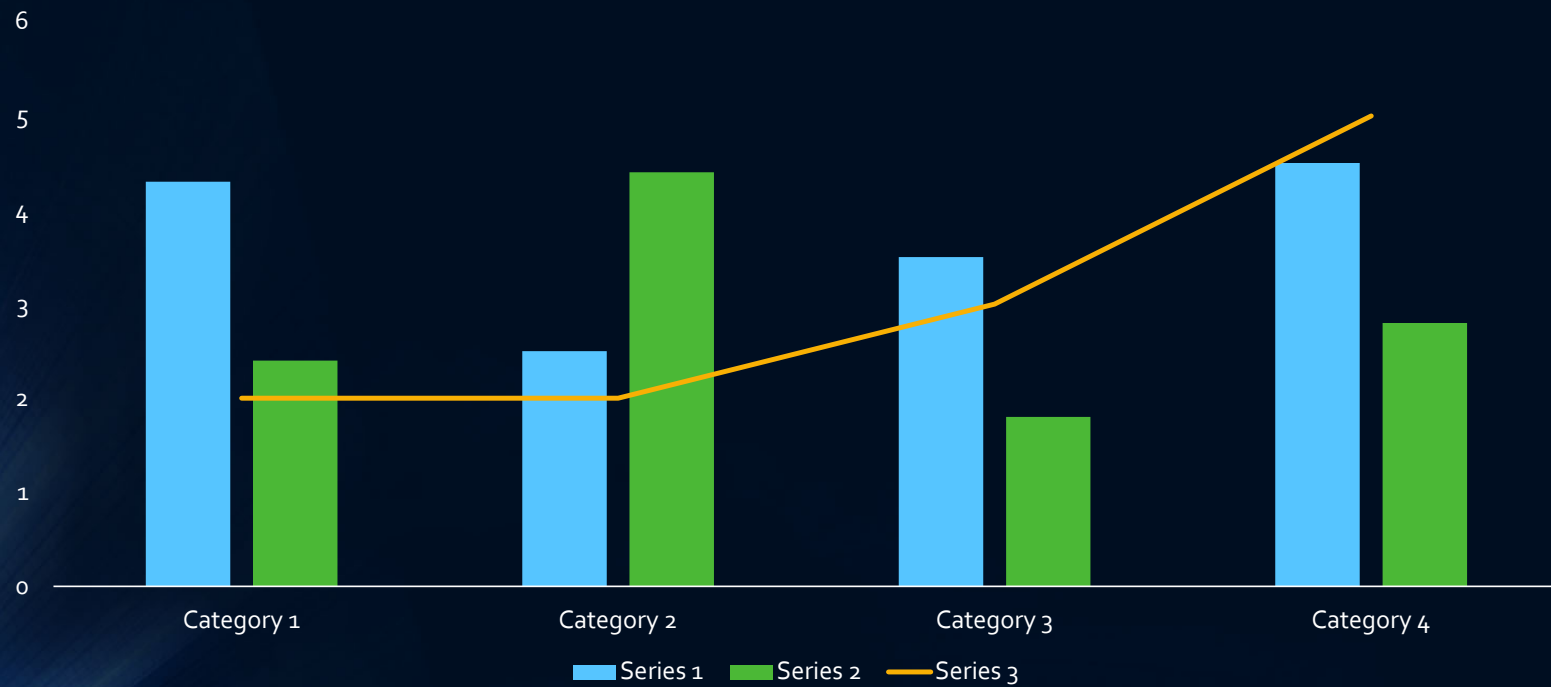
- Continue to streamline onboarding to move SECC closer to full staffing
- Analyze consolidation between SECC and MED-COM after the new County Department is “settled” and adapts to government operation. Identify process where consolidation would improve efficiency or effectiveness. Guard against process changes that jeopardize revenue, create additional expense, where there is no discernable advantage or those that could worsen medical outcomes.

Recommendations – Long-term (24 months +)

- SECC make a concerted effort to get closer to full staffing. This is a prerequisite to many consolidation strategies.
- Develop and implement a plan for process and organizational improvements and consolidation strategies identified. Avoid process changes that jeopardize revenue, create additional expense, have little discernable advantage or change that could worsen medical outcomes.
- Plan and implement longer-term CAD strategies for EMS dispatching.
- Remove impediments to fully sharing dispatch information between MED-COM and SECC.

Questions and Feedback

Title and Content Layout with Chart

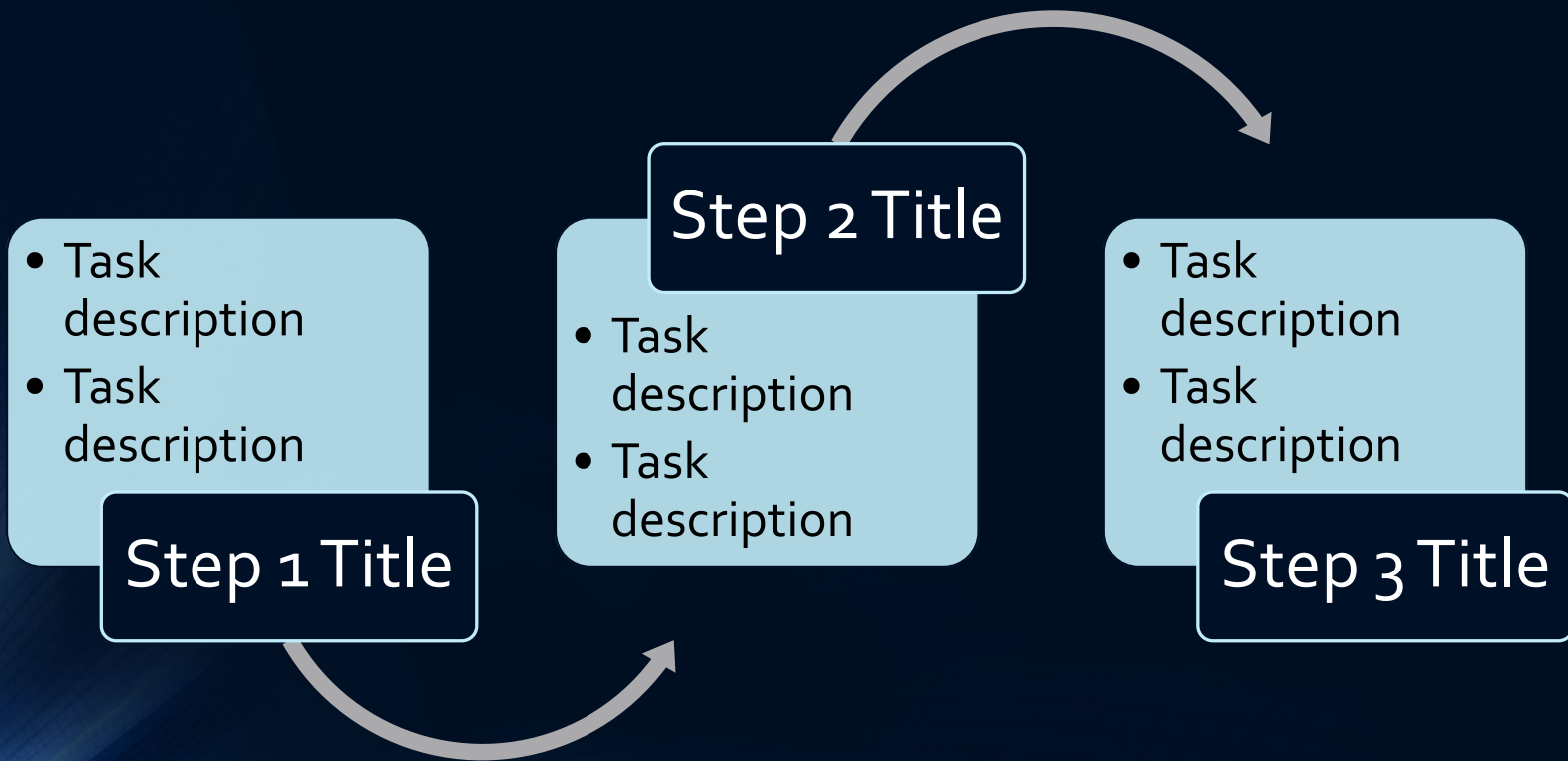


Two Content Layout with Table

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- Second bullet point here
- Third bullet point here

Class	Group 1	Group 2
Class 1	82	95
Class 2	76	88
Class 3	84	90

Title and Content Layout with SmartArt



Add a Slide Title - 1

Add a Slide Title - 2

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