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# Changes coming for ambulance service

## Madelia Community Hospital & Clinic to manage service for a number of area towns and townships

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T-M EDITOR

Beginning on Dec. 1, Madelia Community Hospital & Clinic is going to be managing the community's ambulance service. MCHC Chief Executive Officer Jeff Mengershausen and Madelia City Administrator Chris Fischer are both excited about this sharing of resources and want the residents of the cities and townships involved to understand what this means, as well as what it does not mean.

The city and the townships are partners in owning the equipment and the breakdown of ownership is as follows:

- City of Madelia, 51%;
- City of LaSalle, 2%;
- City of Hanska, 9%;
- Madelia Township, 8%;
- Riverdale Township, 4%;
- Fieldon Township, 2%;
- Linden Township, 7%;
- Lake Hanska Township, 8%;
- Ceresco Township, 5%; and
- Lincoln Township, 4%.

Those entities are still going to retain all of the ambulance service's capital assets, including the rigs.

Right now there are two ambulances, and the hospital has room to store one of them on site. Therefore, the newer rig, which is used as the emergency rig, will be stored at MCHC and the transfer

rig, the older one, will be stored downtown in the fire hall where it has always been located.

"A very important item for people to understand is that this will not increase people's taxes," Mengershausen stated. "It actually will help the city because they will stop losing money on the service."

It is true that the city was losing money by running the ambulance service, as well as paying for all the capital expenditures. So, through a management agreement, the hospital will take over the personnel and expenses yet the service remains owned by the city. That way, at any time in the future, if the city is not happy with how MCHC is managing it, they are able to take it back. The cities and townships retain some control in this partnership.

"Working together is a win-win because we are providing a much better service than what is currently in place; this takes it above and beyond what we are doing now," said Fischer.

MCHC is going to take over billing (which the city outsources right now), personnel, gas expenses and supplies; they can use their buying power to drive down some of the costs associated with the ambulance supplies.

MCHC can also offer more depth in staffing; they have more people to pull from to ride in the ambu-

lance and it will fall under their liability insurance. For years, the rescue squad has struggled to have enough people to cover calls and transfers as they are all volunteers with full-time jobs elsewhere. Nationwide, volunteerism has been on a downward trend, so our community is not the only one that struggles with this issue. The rescue squad members will still be part of the system, although now through the hospital, and MCHC will also take over paying wages.

"Our plan is to hire a full-time paramedic and we're look at hiring a full-time EMT," Mengershausen stated. "They will be stationed here at the hospital as full-time employees, adding two brand new jobs to the community." He said that will go a long way in covering day shifts; then the volunteers can fill in the night shifts when they are able.

The current rescue squad members are on board with this new plan. "This is better for the community because the hospital has a sustainability plan that will allow for a couple of full-time staff members and gives us more resources for education," stated current Rescue Squad Captain Becky Griebel. "This will also be better for the community as we will be part-time Advanced Life Support (ALS)."

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Mengenhauen agreed that one of the most exciting pieces of this arrangement is taking the ambulance service from a basic life support service to an advanced life support service. "How do you sustain this growth and hire people?" Mengenhauen posed. "It is through transfers." Right now the ambulance service is getting about 200 to 210 emergency calls a year and does about six transfers a month, but transfers are where the service can make more money. However, volunteers really have a hard time taking transfers because it is a big time commitment and it takes them away from their jobs for a chunk of the day.

"If we go from six transfers a month to even nine transfers a month, it will pay for itself," Mengenhauen stated. "We will be one of the only rural communities in our area that has an advanced life support unit. The only other ones in our area are Mayo and Allina. I honestly think we will be getting calls from Mayo facilities [to hire MCHC to do transfers] because they are already stretched pretty thin. It will help our hospital, too, because we have to wait for Mayo or Allina [to be able to do an ambulance transfer] and we

are at the bottom of the list. It's affecting patient care because we have people sitting in the hospital and it's not appropriate because they need a higher level of care. Once the word gets out there – and we are up and running – if they need a transfer, we can help them out."

To be clear, the hospital is not planning to make a lot of money with the ambulance service. "This is still a community service. But it will be self-sustaining and the benefit is that we have better access to transfers, which hinders patient care and safety. We also have more control and can respond quicker to the community," Mengenhauen clarified. MCHC plans to stay within the mid-range for pricing and is not planning major changes, but will assess where things stand moving forward.

One reason for choosing the Dec. 1 date for this to take place is because the rescue squad's medical director, who is from another community, is retiring on that date and the contract with him ends. Communication has been a challenge in the past with having a medical director who is not located in Madelia. Dr. Michael Nelson, a full-time physician at MCHC, is going to be the new ambulance service

medical director. Nelson is the trauma director also, which is great for educational reasons as well.

Overall, Mengenhauen was very happy to share that MCHC is growing and adding jobs; they have added two nurse practitioners, as well other areas of staffing, and are using less locum coverage. That is not just better for MCHC in terms of dollars saved, it means continuity for the patients, as well as employees who are living in the area and invested in the community. The clinic showed 138% growth in the first four months of this year alone. Also, MCHC is on budget, which has not happened in years.

"I am really excited for what we can now offer the community," said Fischer. "These are exciting and positive changes that are happening. This is a great fit for the city and for the surrounding areas; we should actually see better service for everyone."

"At the hospital we live and breathe health care, we talk health care – it's what we are all about. We are experts, so it only makes sense to put the right assets in the right spots; this makes complete sense," concluded Mengenhauen.



Photo courtesy of Madelia Community Hospital & Clinic

SUBMITTED PHOTO

The current rescue squad members are on board with the new plan. L-R: Daria McCabe, Sarah Van-Hale, John Tierney, Josh Schoener, Terri Baumgartner, Brooke Morris, Jeremy Maul and TinaMarie Nelson.