EUGENE SPRINGFIELD FIRE
Office of the Chief
1705 West 2nd Avenue, Eugene, OR 97402
541-682-7100

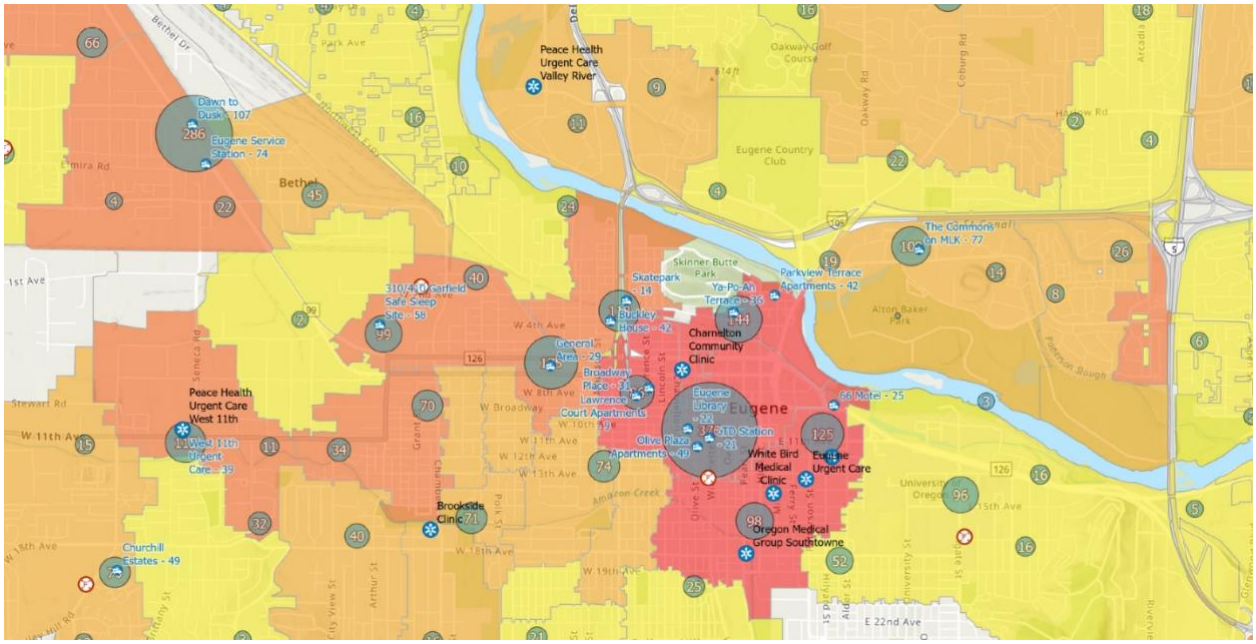
COURAGE
HONOR
SERVICE

PeaceHealth Sacred Heart University District (SHUD) Closure Impacts

Current Status and Closure Impact

Eugene Springfield Fire (ESF) provides approximately 4,200 ambulance transports to Peace Health Sacred Heart University District Hospital (SHUD) from within the City of Eugene each year. Approximately 86% of transports receive regular services at the Emergency Room and 607 or 14% receive behavioral health services. Transports are completed by Advance Life Support and Basic Life Support crews. Each ambulance has 2 regular staff and approximately 5% of transports require additional staff support from fire suppression crews. Transferring the patient from transport to SHUD staff takes an average of 23 minutes. Delays in offloading the patient to hospital care are often impacted resulting in ESF staff to wait with the patient. This wait time is a result of hospital staff availability and space. Current Ambulance Patient Offload Times (APOT) range from 10 minutes to more than 2 hours and are higher on average at Peace Health Sacred Heart Riverbend (SHRB).

SHUD closure of the Emergency Department, and possible reductions to behavior and mental health services will impact overall system reliability. The current system is strained. Current EMS call volume averages 118 calls for service per day and this is unsustainable based the current staffing model and additional transport time will further impact ambulance response.

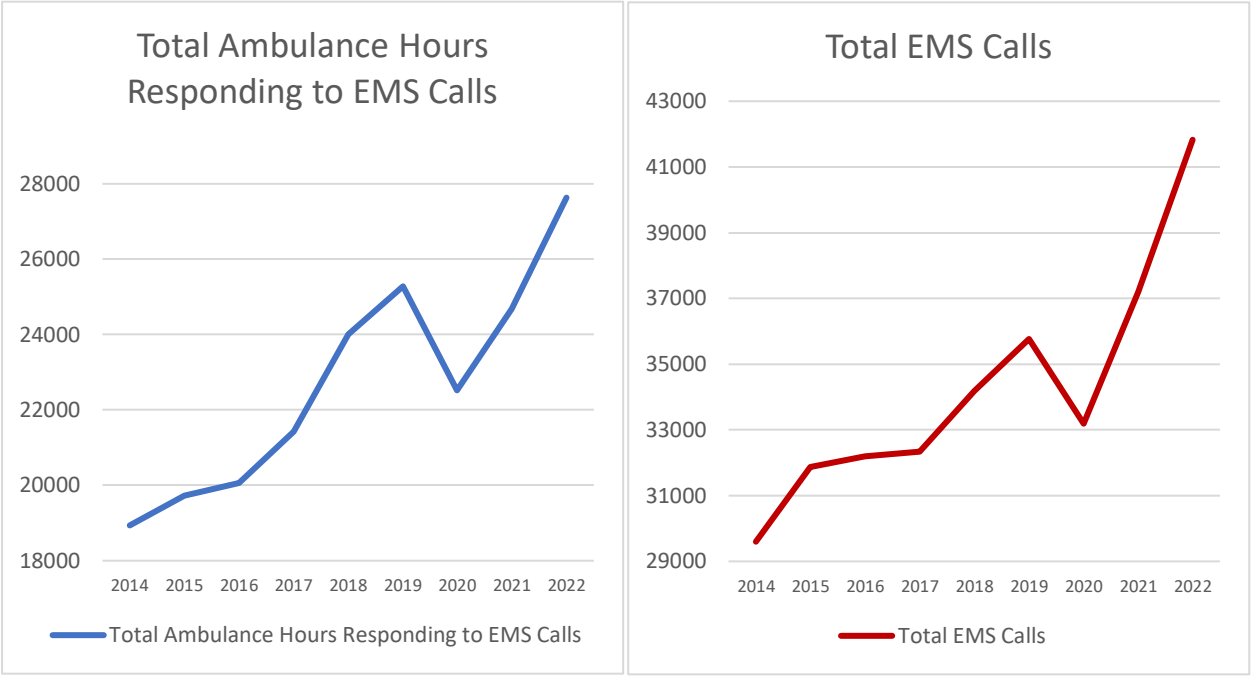


2022 ambulance transports to SHDU, large clusters indicate high volume areas where critical access to services are limited.

EUGENE SPRINGFIELD FIRE
Office of the Chief
1705 West 2nd Avenue, Eugene, OR 97402
541-682-7100

COURAGE
HONOR
SERVICE

Based on service experience, the average service time to take a patient to PH-UD is 11 minutes and additional travel to Sacred Hearth Riverbend (SHRB) Emergency Department adds 6 minutes. Based upon the assumption that 4,200 patients will require transport and services to SHRB ED, the average ambulance out of service time per transport is projected to be 27 minutes.



Service demand continues to climb often leaving the community without adequate emergency response capacity.

A potential unknown impact is the approximately 30,000 people treated at SHUD in 2022 who walked or used other means of transport to SHUD for care and will need transportation to SHRB ED or alternative service options.

Addressing the Access to Care

1.) Flexible Timeline for SHUD Closure
   a. Adjust timeline to provide ample time for assessing impact and developing shared solutions.
   b. City of Eugene is requesting an additional 9 months to increase EMS response services.
   c. Commitment from PeaceHealth to reduce Ambulance Patient Offload Time (APOT)
   d. Commitment to maintain behavior and mental health services at SHUD until SHRB capacity for service is available.

2.) Service level need at SHUD or downtown Eugene
   a. In-patient hospital (long-term)

b. Expansion of 24-hour Urgent Care services. Eugene supports Lane County efforts to expand current clinic.
c. Maintain SHUD critical behavioral health services and funding for Stabilization Center.

3.) Immediate Service Stabilization Needs
   a. To maintain the current response reliability with increased transport demand, transport times and APOT times will require adding two peak demand Advanced Life Support units. The units will provide 12 hours staggered response periods based upon service demand needs. The cost is approximately $2 million per year.
   b. Addition of a peak hour community response unit CRU $1.4 million per year
   c. City supports funding for expansion of LTD managed Ride Source or alternative transportation programs.

4.) Mid and Long Term Needs
   a. As an ESF EMS program or in partnership with Lane County, deploy advanced provider units (a Paramedic with a Nurse Practitioner or Physicians Assistant)
      i. Capable of treating non-life-threatening issues in place.
      ii. Capable of bringing clinic services to high-risk individuals densely populated areas.
      iii. Reduces strain on ambulances and emergency rooms.
   b. In Partnership with Lane County's clinic, implement nurse triage services in dispatch preventing 911 calls and ER visits.
   c. Legislation to provide reimbursements when expanded ambulance transportation destinations to include Lane County's walk-in clinic and area urgent care facilities are utilized.
   d. Development of alternative transportation options with LTD's Ride Source program for patients who do not warrant emergency ambulance services.
   e. New station being planned to serve the core area of Eugene should consider housing alternative response and community health resources.

Future Ready Vision

Independent of the impacts of the SHUD closure, Eugene Springfield Fire has been establishing the building blocks for a future ready EMS system. Goals of alternative response planning are aimed at reducing dependance on the 911 system, ambulance transport and subsequent ER usage.

- 911 Prevention activities include nurse triage services in the dispatch center and community health paramedics to address high system users.
- Deployment of advanced providers in the field to treat in place and facilitate alternative access to care will relieve critical system pressure from EMS and ER services.

Execution of future ready solutions will require partnerships with the hospital system, Lane County Public Health and elected leaders to fund and remove barriers implementation within the public health system.