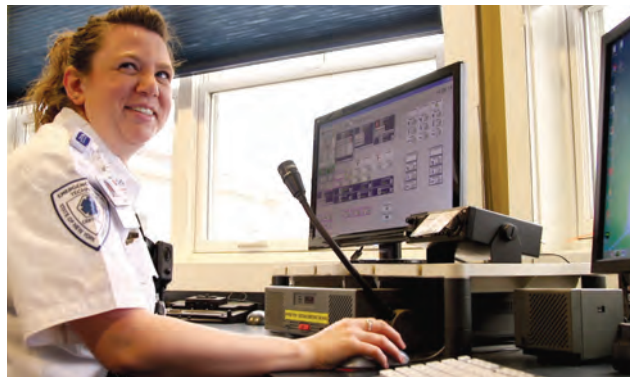


2017 ANNUAL REPORT



CHS
MOBILE INTEGRATED
HEALTHCARE



*“Coming together is a beginning;
keeping together is progress;
working together is success.”*

—HENRY FORD



About CHS Mobile Integrated Healthcare



2017 CHS Agencies

Vision Statement

We are a sustainable community-based Emergency Medical Services and Health Care organization that is professional, innovative, proactive and provides exceptional services, while honoring our history and building our future.

Mission Statement

Deliver high-quality health care while striving for continuous improvement, operational efficiencies, financial sustainability and accountability through multi-faceted services; Enhance community and customer/client relations through public outreach and education; Promote leadership, cohesiveness, uniformity, staff development, satisfaction and recognition; and Recruit and retain staff who share the vision, mission and core values of the organization.

Our Core Values

- A**ccountable
- L**eadership
- E**xcellence
- R**espect
- R**esponsible
- T**rustworthy





As I reflect on fiscal year 2017, I am pleased with how all our caregivers have stepped up to a number of new opportunities. In late 2016, the merger of Chili Volunteer Ambulance Service, Inc., Scottsville Rescue Squad and Henrietta Volunteer Ambulance Service, Inc. was finalized—and thus CHS Mobile Integrated Healthcare (CHS MIHC) was born. We began operating as a combined agency

on January 1, 2017. A change of this magnitude creates an uneasy feeling at many levels. For town officials, the long history of having a dedicated service in their community was at question. For residents, they shared a similar concern as change can be a hard thing to process. Many of these folks had spent 60+ years knowing who was going to show up at their doorstep if they called 911. Each of these concerns were not taken lightly and were factored highly into the transition to CHS MIHC. Unfortunately, there was no quantitative way to allay the concerns until we began providing service to the newly combined operating area.

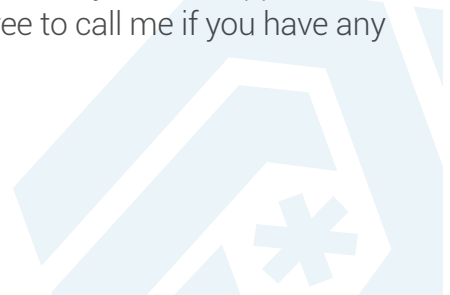
With any new venture comes a few minor hiccups, as was seen in the first quarter of 2017. We quickly adjusted a few operational items which corrected the issues. Throughout all of 2017, our response times held steady, and in many cases, improved. Similarly, call coverage improved with CHS MIHC responding to 98.69% of its requests for service, needing help from our neighboring EMS agencies on only 1.31% of our calls. While call coverage and response times are important, we engage a third-party company to conduct patient satisfaction surveys. They tell us how our caregivers are doing and identify any areas that we may need to improve upon. As an agency that is always looking for ways to serve the community better, the feedback from the surveys is invaluable.

This is both an exciting and challenging time to be providing emergency medical services to the community. The merger of our three agencies has strengthened us and will allow us to continue to provide the great care our patients have come to expect. We continually look for opportunities to improve our services and welcome your feedback. Please feel free to call me if you have any questions or comments.

Sincerely,

Reginald Allen, BS, NREMT
Chief/CEO

Message from the Chief/CEO





CHS at-a-Glance

+ 9,838
RESPONSES

+ 6,554
TRANSPORTS

+ 102
MEMBERS

+ 6
EMERGENCY
DEPARTMENTS SERVED

+ 81,417
RESIDENTS IN
THE SERVICE AREA

+ 144
SQUARE MILES COVERED

+ 92
% PATIENTS WHO RATED
CARE AS EXCELLENT
OR VERY GOOD



Our fleet of nine
ambulances
traveled over
198,000 miles.

did?
YOU
know



An Emphasis on Safety and A Helping Hand

CHS places a major focus on safety—both for the patient and our caregivers. Our team members are trained in proper lifting and patient movement techniques. This provides a safe environment and reduces the risk of employee or patient injury. Each new member is trained on how best to extricate or transfer a patient from one place to another. Our goal is to move each patient in a timely, safe and comfortable manner.



Much of what we do involves lending a helping hand to those in need. While it may seem inconsequential to some, our caregivers spend a good deal of time going above and beyond to help. Sometimes it may be an elderly patient who just needs help getting out of their vehicle because their loved one is too weak to assist them. Perhaps it's helping a family organize their mother or father's medications or arranging for transportation in a non-emergency situation.

We're also the "eyes and ears" inside a patient's home much of the time. There are times when we can spot a potential issue and work to resolve it. Seemingly simple things—a throw rug that may cause a trip and fall; a patient who is in need of food or assistance with medication compliance; or general hazards in the home.

Demand Breakdown



7.18%
Requests for CHS
into Other Districts
(707)

66%
Total Patients
Transported
(6,554)

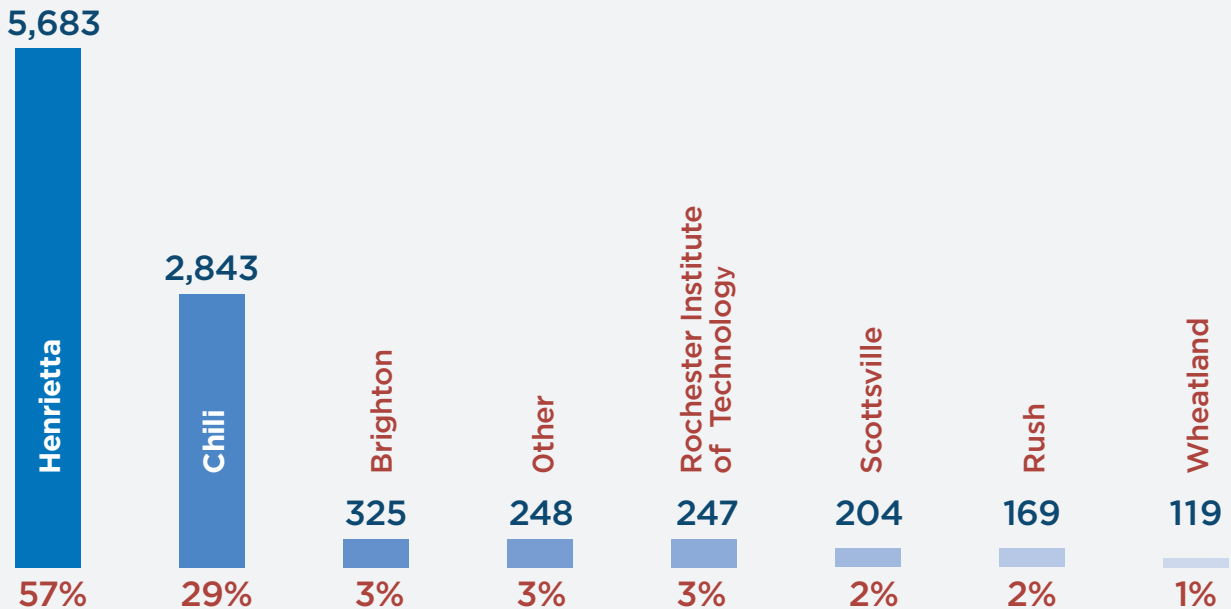
9,838

Total Requests
for Service

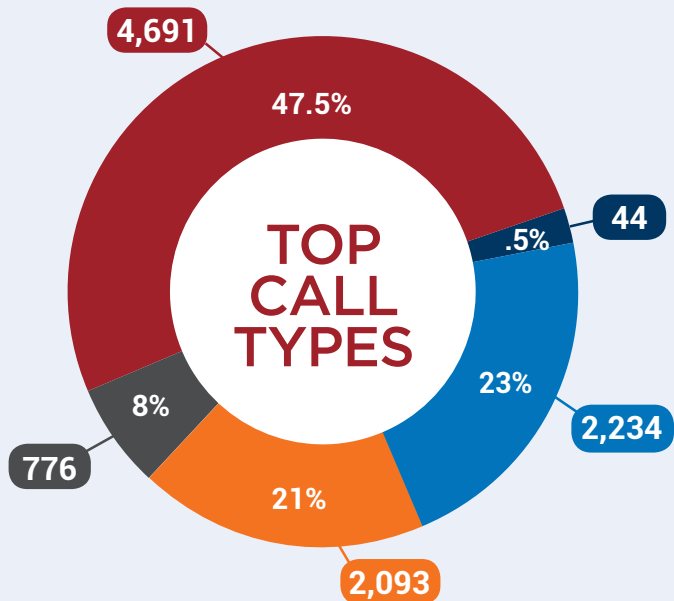
98.69%
Requests Handled
by CHS
(9,709)

1.31%
Requests Handled
by Other Agencies
(129)

REQUESTS BY AREA/MUNICIPALITY



- LOWEST PRIORITY (P4)
- LOWER PRIORITY (P3)
- POTENTIALLY LIFE THREATENING (P2)
- LIFE THREATENING (P1)
- NON-EMERGENCY, OR STANDBY



Demand Breakdown

TOP 10 REQUESTS BY TYPE

GENERAL ILLNESS	1,375	11.91 %
PSYCHIATRIC	691	5.99%
PAIN	572	4.96%
SYNCOPE	415	3.60%
SHORTNESS OF BREATH	361	3.13%
LIFT ASSIST / FALL	315	2.73%
HEAD INJURY	304	2.63%
NAUSEA / VOMITING	303	2.62%
DIZZINESS	294	2.55%
LEG INJURY	277	2.40%

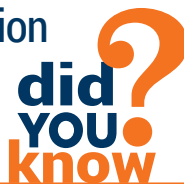
We provided crutches, a cane, a walker or wheelchair at no charge to over 800 people.



Response Time Metrics



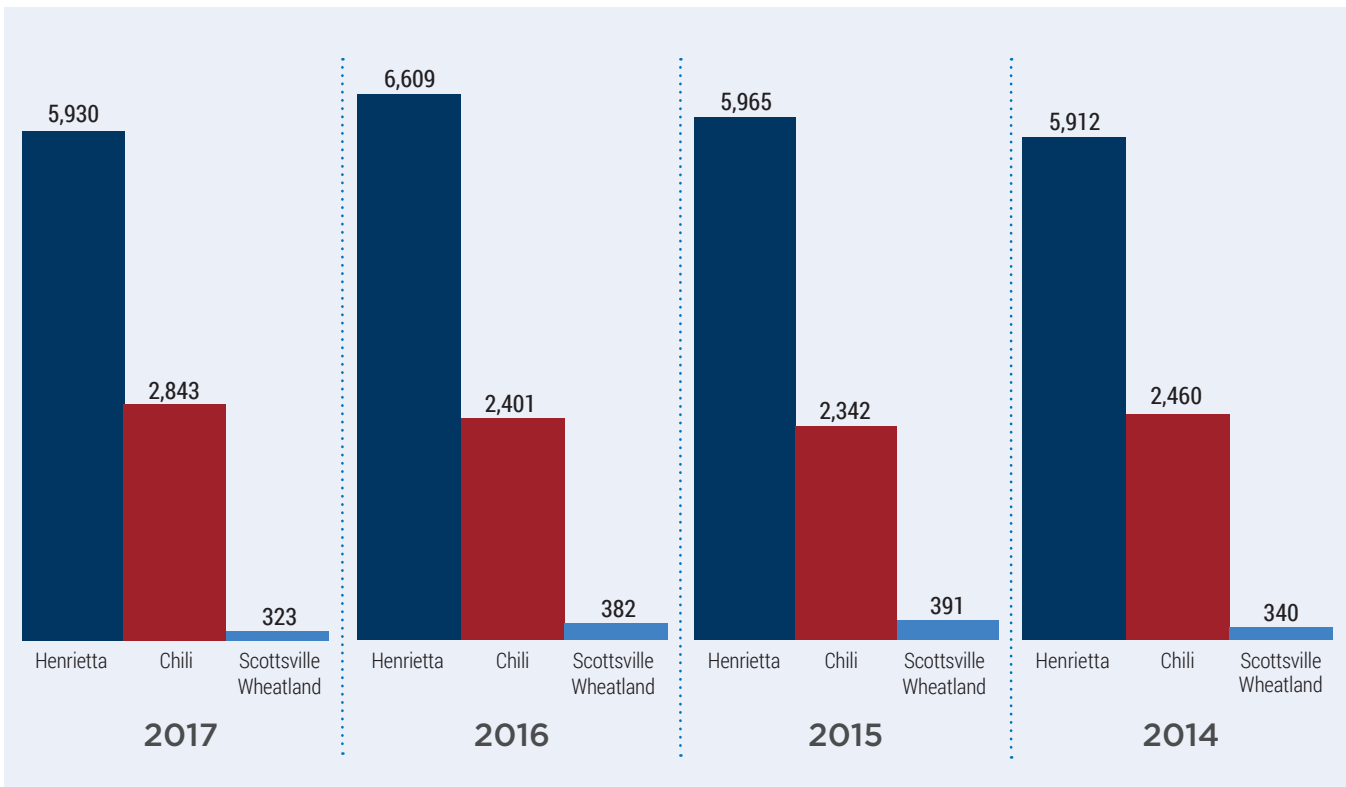
CHS is one of only three agencies in New York State to receive formal accreditation by CAAS.



AREA/PRIORITY	MINUTES	RESPONSE TIME GOAL	GOAL MET
HENRIETTA			
Life Threatening	9:00	≤10:00	✓ Met
Potentially Life Threatening	9:00	≤10:00	✓ Met
Lower Priority	12:00	≤15:00	✓ Met
Lowest Priority	12:00	≤25:00	✓ Met
CHILI			
Life Threatening	10:00	≤10:00	✓ Met
Potentially Life Threatening	11:00	≤10:00	✗ Not Met
Lower Priority	12:00	≤15:00	✓ Met
Lowest Priority	13:00	≤25:00	✓ Met
SCOTTSVILLE			
Life Threatening	11:36	≤17:00	✓ Met
Potentially Life Threatening	14:36	≤17:00	✓ Met
Lower Priority	13:24	≤22:00	✓ Met
Lowest Priority	14:00	≤32:00	✓ Met
WHEATLAND			
Life Threatening	11:00	≤17:00	✓ Met
Potentially Life Threatening	13:18	≤17:00	✓ Met
Lower Priority	13:54	≤22:00	✓ Met
Lowest Priority	14:00	≤32:00	✓ Met

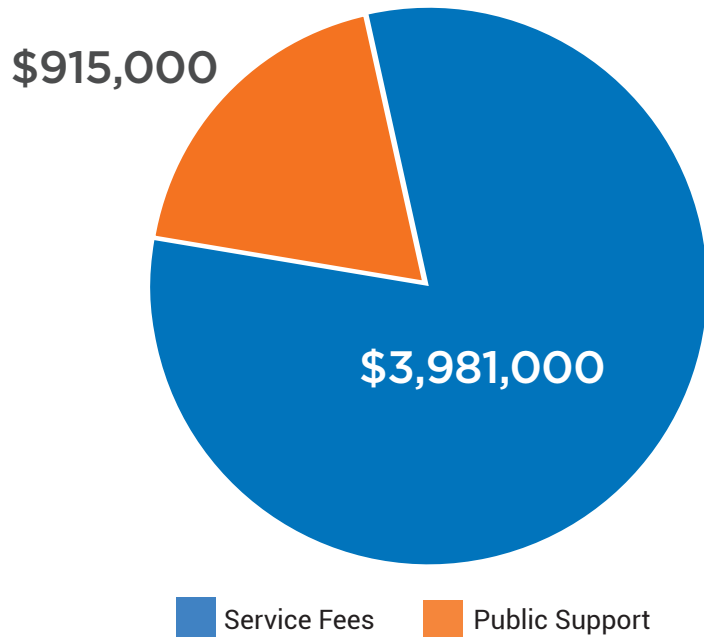


Response Growth

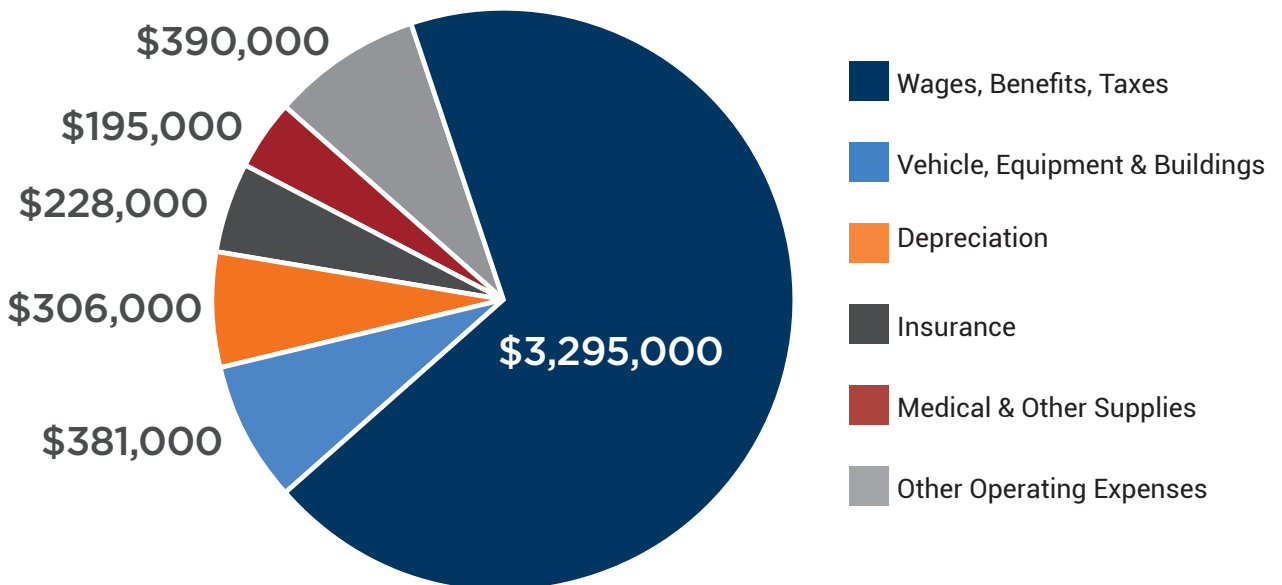


2017 Fiscal Year Financial Performance

2017 INCOME TOTAL: \$4,896,000

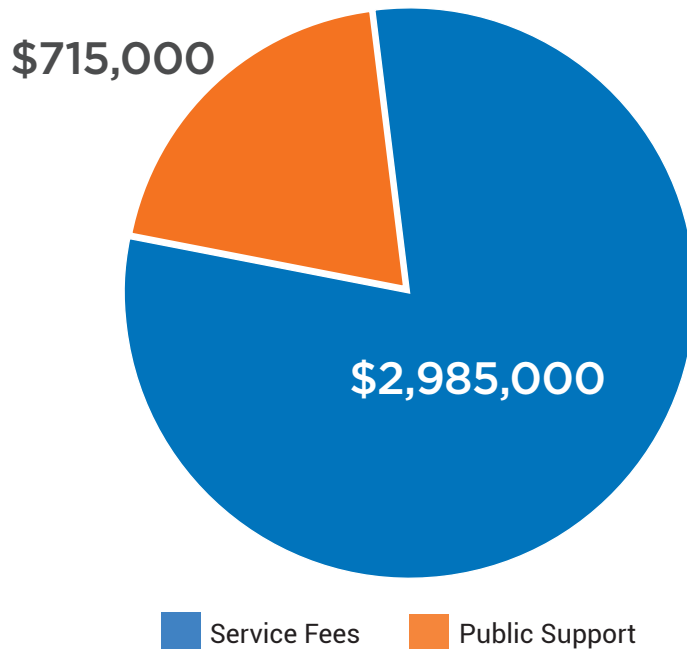


2017 EXPENSES TOTAL: \$4,795,000



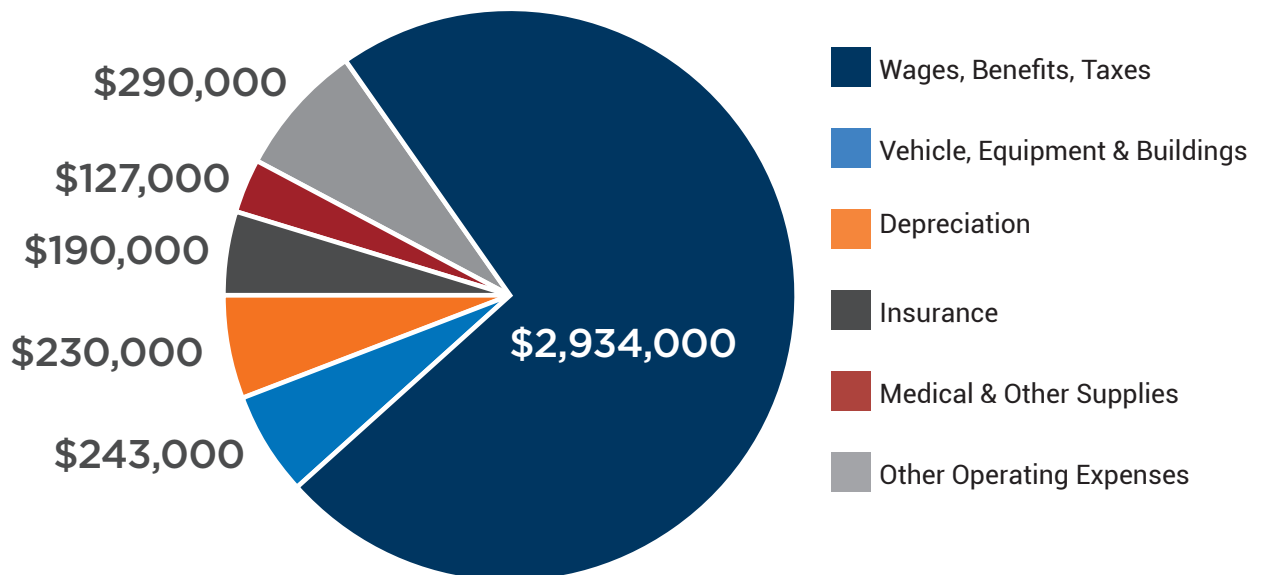
2017 OPERATING INCOME: \$101,000

2016 INCOME TOTAL: \$3,700,000



2016 Fiscal Year Financial Performance

2016 EXPENSES TOTAL: \$4,014,000



2016 OPERATING INCOME (LOSS): (\$314,000)

Selected information from 2017 and 2016 audited financial statements.

Mission Oriented Employees



2017 Member Survey Results

- + I Get Satisfaction from the Work I do:
**91.8% Agree/
Strongly Agree**
- + I Am an Important Part of the Care Team:
**83.61% Agree/
Strongly Agree**
- + I Enjoy Supporting My Team Members:
**90% Agree/
Strongly Agree**
- + My Work Has Meaning and Purpose:
**94.91% Agree/
Strongly Agree**
- + At the End of the Day, I Feel I Have Contributed to the Quality of Life of the Patients I Serve:
**94.91% Agree/
Strongly Agree**

Our EMTs and paramedics come to work each day with the upmost compassion for their patients. They drive to become a better provider than they were the day before. Each shift the caregivers at CHS provide around-the-clock care to the communities they serve. They complete extensive training classes throughout the year to prepare for whatever challenges they may face.

The operations and logistics teams work behind-the-scenes to provide the necessary support to allow CHS to function 24/7/365. From office and billing staff to fleet and facility maintenance, the team at CHS is second to none.

Every member of CHS is dedicated to providing the highest level of care—whether in the ambulance or in an office — it's a team that makes it all happen.

Working at CHS has been an amazing experience thus far. I know when I walk in the door that all my co-workers are motivated and caring individuals which helps me become better at my job every day. I'm proud to be a part of the CHS family.

—EMILY WYSOCARSKI - FULL-TIME EMT
& FORMER EXPLORER

The Following Awards were Presented to CHS Members in FY '17:

Matthew Rothberg - EMT of the Year for Monroe/Livingston

Christopher O'Brien - Paramedic of the Year for Monroe/Livingston

William Arnold - Dick Tripp Award for Monroe/Livingston



Matthew Rothberg, Christopher O'Brien, William Arnold

Mission Oriented Employees

"Having a company that bases its values around patient care and compassion is very refreshing. It's nice to know that the department has my back and wants to see me grow as a caregiver and as a person in general."

—NICHOLAS LOWRY,
FULL-TIME PARAMEDIC

"I've been a volunteer EMT for 10 years, the last 2 with CHS. Volunteers and paid employees are held to the same high standard. The high expectations are evident by the level of compassion and professionalism shown by all who wear the uniform. I look forward to my shift every week and am proud to be a part of CHS."

—SUMMER O'BRIEN,
VOLUNTEER EMT

"I am so excited to have finally found my work home! CHS has shown me that hard work and perseverance result in great things happening for our community. I'm truly grateful to be a part of this experience."

—LAURA COOK,
BILLING MANAGER & EMT

"This organization is so much more than just an ambulance service. We focus on the communities we serve. I feel honored and proud every time I see one of our crews at work; each one of them are passionate and focused on the best possible patient care."

—TYLER TORNSTROM,
LIEUTENANT &
FULL-TIME PARAMEDIC

Our Patients

“As always,
your people
were fast,
expert,
professional,
compassionate
and just
all-around great.”

—PATIENT'S WIFE, 12/16/2016

CHS provided
EMS to a
district of
144 square
miles.



The residents and visitors CHS serves in southwest Monroe County are the primary reason for the agency's existence. CHS cares for an average of 26 patients per day through its 911/EMS response. CHS sees individuals from all walks of life. Patients are newborns, elderly and everywhere in between. Caregivers see people at their worst and take pride in comforting them; putting their mind at ease as they're cared for—calmly, efficiently and professionally. Sometimes a comforting hand and words of reassurance are all that are needed.

Clinical outcomes certainly matter. Equally powerful is the feedback CHS receives directly from patients and family members. In 2017, over 300 patients felt it necessary to reach out on their own accord to provide feedback. In addition, CHS contracts with a third-party company who conducts random independent quality assurance calls. All of the information gathered through these interactions helps CHS continue making improvements to the overall patient experience—a goal that helps ensure the department remains focused on the people who matter most.

“I can’t say enough about the two fine gentlemen that came to my home when I passed out. They were very professional and demonstrated a great bedside manner, and were a very calming influence.”

—PATIENT, 1/17/17



Our Patients

“They were wonderful, kind, compassionate and funny. I was very scared and nervous. Looking back, I realize how at ease they made me feel.”

—PATIENT, 1/23/17

Community Engagement



Without the community, CHS wouldn't exist. Our sole mission is to be here for the residents, our neighbors and their visitors. 2017 was a year of tremendous growth and outreach. As we transitioned to CHS, the relationships we held with numerous community organizations and businesses not only remained but flourished.

We see CHS has a community health partner, not just an ambulance agency that drives patients to the hospital. From our Community Paramedic program to our AED placement program for local businesses, we offer a variety of resources to the greater Rochester area.

2017 Training Classes Conducted by CHS:

- Veteran's Outreach Center
- High Tech Rochester
- School of the Holy Childhood
- Elizabeth Wende Breast Care
- Town of Henrietta Employees
- Town of Wheatland Employees
- Parkwest Women's Health
- Boy Scouts of America
- Urban League of Rochester
- Marine Reserve Center
- ABVI
- Pittsford United Nursery School
- Southside Church of Christ
- & many more...

Community Blood Pressure Screenings:

- Legacy at Erie Station
- Brentland Woods
- Woodcrest Commons
- Alstom Signal
- Butler-Till
- Unither Pharmaceuticals
- eHealth Technologies
- Henrietta Senior Center
- Chili Senior Center
- College Green
- Legacy at Parklands
- Wheatland Senior Center

Community EMS Standbys:

- ROC Dome Center
- RIT Men's Club Hockey Team
- Imagine RIT
- Chil-E Fest
- Numerous Health Fairs
- Boy & Girl Scout Events
- July 4th Fireworks
- Summer Camps
- Soccer Tournaments
- 5K Run



Community Engagement

+ 1,281

PEOPLE TRAINED IN CPR/AED AND/OR FIRST AID

+ HANDS-ON SIMULATION TRAINING CLASSES FOR:
 CHS PROVIDERS, UR MEDICINE EMERGENCY MEDICINE RESIDENTS AND VICTOR FARMINGTON AMBULANCE

+ 1,957

ADDITIONAL PEOPLE TRAINED THROUGH OUR AFFILIATE TRAINING SITES

+ HOSTED NUMEROUS OBSERVERS
 THROUGHOUT THE YEAR INCLUDING EMCC EMT STUDENTS AND UR MEDICINE EMERGENCY MEDICINE RESIDENTS

+ 67

PEOPLE TRAINED IN ADVANCED HEALTHCARE PROVIDER CLASSES

+ 120

TOTAL CLASSES

+ 3 NYS EMT CLASSES
 HOSTED FOR 55 STUDENTS

We provided on-site medical coverage for 51 standbys and community events.



Clinical Excellence



The hands-on skills, compassion and bedside manner of our caregivers are driving principles of excellent clinical care. The providers at CHS have access to world class training opportunities. Keeping continued professional and personal growth at heart, the team strives to provide the absolute best clinical care in the region.

AED



Automated External Defibrillator

Major Trauma

Patients who are severely injured require prompt treatment to include a very limited "on scene" time.

- CHS # Minutes Spent On-Scene: **11.0**
- Regional # Minutes Spent On-Scene: **12.3**
- # Minutes National Standard: **10.0**

American Heart Association Award

CHS received the American Heart Association's Mission: Lifeline® EMS Gold Plus Award for implementing quality improvement measures for the treatment of patients who experience severe heart attacks. This is the fourth straight year the agency has been honored with a Mission: Lifeline® Award.



Return of Spontaneous Circulation (ROSC)

ROSC happens when a victim suffering cardiac arrest is successfully resuscitated to a point where they regain a pulse. We closely monitor each incident of cardiac arrest and compare our patient survival rate against a national average.

% Patients With ROSC
37.7%
GOAL: 23% ⁽¹⁾ (MET)

% Patients Discharged Neurologically Intact
9.4%
GOAL: 8.3% ⁽²⁾ (MET)

⁽¹⁾ American Heart Association - As of 2015, 23% of patients nationally. ⁽²⁾ American Heart Association - As of 2015, 8.3% of patients nationally.



Our 2017 Leadership

2017 Leadership

Chief / CEO

Reginald Allen

Executive Deputy Chief

James J. Bucci

Deputy Chief,

Admin & Support Services

Matthew Jarrett

Battalion Chief

Greg Dunn

Asst. Chief, Training

Linda Missel

Clinical Care Manager

Frank Manzo

Captains

Jason Draper

Michael Hoskins

Chris Murtaugh

Mark Philippy

Lieutenants

Jennifer Flickner

Alexander Gibson

Michael Lopez

Jesse Merdak

Eric Thomas

Tyler Tornstrom

2017 Board of Directors

Chairperson

Tracey Wenzel

Vice-Chairperson

Chris Tanski

Secretary

Kimberly Stankey

Treasurer

Stephen M. Winner

Recording Secretary

Susan Hanson

Directors

Robert Auerhahn

Brett Benedict

Cheryl Arilotta

Jason Aymerich

John McParlin

Michael Smith

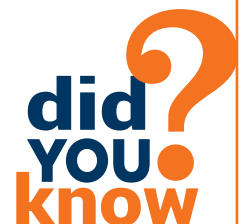
Summer O'Brien

Medical Direction

Dr. Jeremy Cushman

Dr. Christopher Harmon

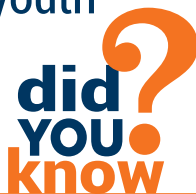
CHS has been
recognized by
the American
Heart Association
for outstanding
cardiac care
4 years in
a row.



Community Paramedic Program

The Rochester-area Community Paramedicine study has enrolled approximately 800 participants from both Strong and Highland Hospitals.

We offer station and ambulance tours to youth groups.



When older adults are discharged from the Emergency Department (ED), it can be a difficult time for patients and their caregivers. The transition back to their home after an ED visit can be difficult – there may be new medications, follow-up appointments, and new symptoms to monitor. In fact, after being sent home from the ED, many older adults will return to the ED within the next 30 days.

Many older adults have a primary care doctor as well as other specialists (e.g., cardiologist, neurologist, etc.), and home health aides, which can complicate the coordination of medical care, especially following an ED visit as these providers receive variable information about what transpired while the patient was in the hospital. CHS has partnered with the University of Rochester Medical Center in an effort to address the ED-to-home transition period. This program uses highly trained Community Paramedics from CHS to focus on patient-centered care with the ultimate goal of helping patients identify goals, navigate the healthcare system more effectively, and integrate any instructions or information provided to them in the ED. In this program, the Community Paramedics do a home visit within 48 hours of their ED visit and then also call the patient to check-in over the next 30 days.

While 911 response remains the mainstay of our service, CHS offers numerous additional services to the community including:

- Community Paramedicine Program
- Complimentary blood pressure checks & clinics
- Equipment loan closet – walkers, canes, crutches, wheelchairs
- CPR & First Aid training classes
- Corporate AED placement
- Standby Events
- Hands-only CPR training
- Facility tours
- Show & tell for local youth
- Explorer Post
- Complimentary AED Checks
- Public & Healthcare Provider Ride-alongs

Additional Community Services

Explorer Post

The Explorer Post is a great opportunity for teens aged 14-18 to experience EMS first-hand. Our Post involved 15 youth members from the community in a number of exciting and educational events last year. We offered active learning drills, procedure review and taught about advancements in the field. CPR/AED and First Aid training is offered to all members.



A Trail Blazer



Irene Johnston - Henrietta Volunteer Ambulance Life Member.

Irene Johnston is one of the early members of Henrietta Volunteer Ambulance Service, Inc. (now a part of CHS). She began her career in EMS as a volunteer dispatcher in 1965, just two years after the small all-volunteer "first aid squad" began. She took a first aid class and began to train as a medic learning how to administer oxygen, how to extricate a victim and how to properly lift a patient. In the early 1970's, Ms. Johnston completed one of the first EMS classes in Monroe County which was held over the weekends at MCC. She then completed the "coronary class" at UofR along with nurses (early 1980's) where she learned how to read an EKG and start an IV. In 1984, HVA hired Irene as its first full-time employee with the title of Office Manager and Chief. With an operating budget of \$100,000, she maintained her "Level III" medic status and oversaw the growing primarily volunteer agency. Thanks to her baking skills and continued desire to give back to the community, she is affectionately known by current members as "the cookie lady". Current members can always expect a fresh batch of cookies thanks to Irene!

We are forever indebted to Irene and many others like her--those that had the vision, drive and volunteer spirit at a time when pre-hospital medicine was virtually non-existent. The charter members of the Henrietta Volunteer Ambulance Service, Chili Ambulance (Fire Department) and Scottsville Rescue Squad (Fire Department) will always be fondly remembered and respected as visionaries who paved the way and allowed for what we have today.



Dr. Boddle, Irene Doggan (Johnston), Barbara Rose.

Through HVA I have experienced many things about life, death and living in between. Some were funny, some were heartbreaking and some were joyous. As a medic I have known fear, anger, excitement, frustration, satisfaction and doubt. There were many calls and each has its own story but one day does stand out. I was the medic on the primary ambulance during the paralyzing ice storm of 1991 when we went from call to call for days. I have experienced the joy of seeing CPR work, the satisfaction of starting an IV in a moving ambulance and the heartbreak of a child at the bottom of a pool. I have been privileged to assist in the awesome miracle of childbirth which makes your heart swell and brings tears to your eyes. Other calls brought tears as well, doing CPR on a baby, facing the family of a suicide.

It's exhilarating to see the changes in EMS, from the rigs themselves, the equipment, the training, the expectations and perceptions.

I have always had a fierce pride in HVA as a good organization which saw a need and filled it. It has been fun, gratifying and humbling. Knowledge and experience can breed confidence but one mistake can change lives, including your own.

There is one thing I know for sure, through HVA I found myself as well as lifelong friendships that I cherish to this day.

Suzanne Johnston



CHS Mobile Integrated Health Care, Inc.

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