

THINNING RANKS AND RISING RISKS

A Study of EMS Capacity in Chippewa
County

Executive Summary

Purpose

The primary objective of this initiative was to comprehensively understand the current state of Emergency Medical Services in Chippewa County, Wisconsin.

Background:

In 2023 and 2024, the Chippewa County EMS Association initiated conversations regarding the escalating challenges faced by local agencies. These difficulties mirror broader statewide and national trends affecting primarily volunteer-driven ambulance services. Recognizing the severity of the situation, the Association approached both the Chippewa County Administrator and the Chippewa County Emergency Management Department to identify solutions and opportunities to alleviate the pressure agencies were facing.

Methodology:

This project was created in collaboration with James Small from the Wisconsin Office of Rural Health. The assessment utilized a specific instrument designed by Small to understand the local EMS context. The working group edited and adapted this instrument to include targeted questions for both transporting agencies and non-translating units (Emergency Medical Responders).

Key Findings

The report highlighted critical challenges regarding reliability, workforce sustainability, and the "ripple effect" of service gaps. Significant concerns are for volunteer-heavy EMS agencies who rely on older volunteers and face increasing demands from an aging population.

Key Contributors:

Marcy Trubshaw: Chippewa County Emergency Management

Ron Patten: President, Chippewa County EMS Association

Garret Zastoupil, PhD: UW-Madison Division of Extension

James Small: Wisconsin Office of Rural Health
Tamee Foldy: Chippewa County Communication Center Director

How is Wisconsin's Emergency Medical Service System Performing?

5.9 Million Wisconsinites

72 Counties

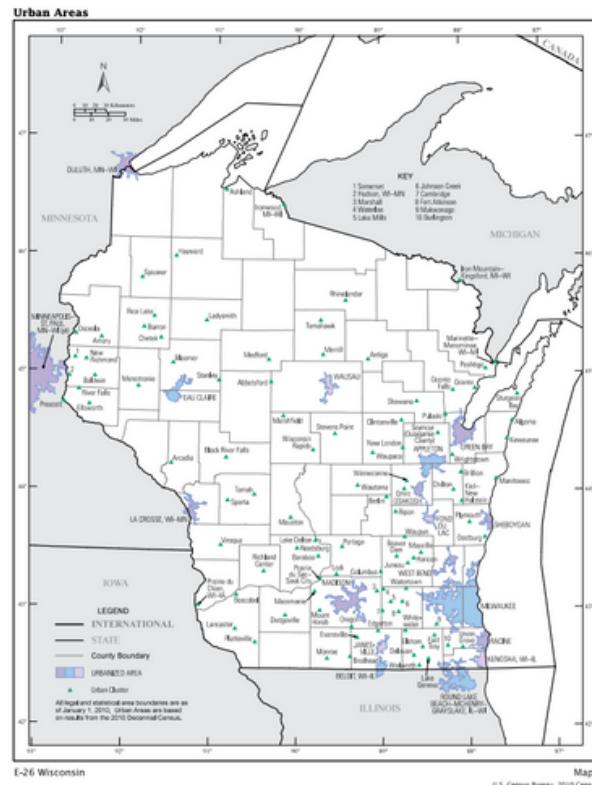
11 Federally Recognized Tribal Nations

1850 Local governments

1265 Townships

585 Cities and Villages

97% of the land in Wisconsin is Rural



Map of Wisconsin Urban Areas, Wisconsin Department of Natural Resources

What is an Emergency Medical Service (EMS)?

- Out of Hospital Emergency healthcare and transport provided within a community EMS is provided as a function of local government. Wisconsin State Statute makes the following distinctions for municipalities regarding EMS:
 - The town board **shall** contract for or operate and maintain ambulance services unless such services are provided by another person.
 - Wis. Stat. § 60.565
 - The village board **may** purchase, equip, operate and maintain ambulances and contract for ambulance service with one or more providers for conveyance of the sick or injured. The village board may determine and charge a reasonable fee for ambulance service provided under this section.
 - Wis. Stat. § 61.64
 - The common council **may** purchase, equip, operate and maintain ambulances and contract for ambulance service with one or more providers for conveyance of the sick or injured. The common council may determine and charge a reasonable fee for ambulance service provided under this section.
 - Wis. Stat. § 62.133

EMS In Chippewa County

Chippewa County has a diverse network of Emergency Medical Services, including both transporting and non-transporting Emergency Medical Responder (EMR) agencies. Transporting agencies are essential for delivering ambulance services. EMRs often provide first-on-site care in emergencies, and can drive ambulances.

Transporting

Paramedic

Chippewa Falls Ambulance
Chippewa Fire District Ambulance

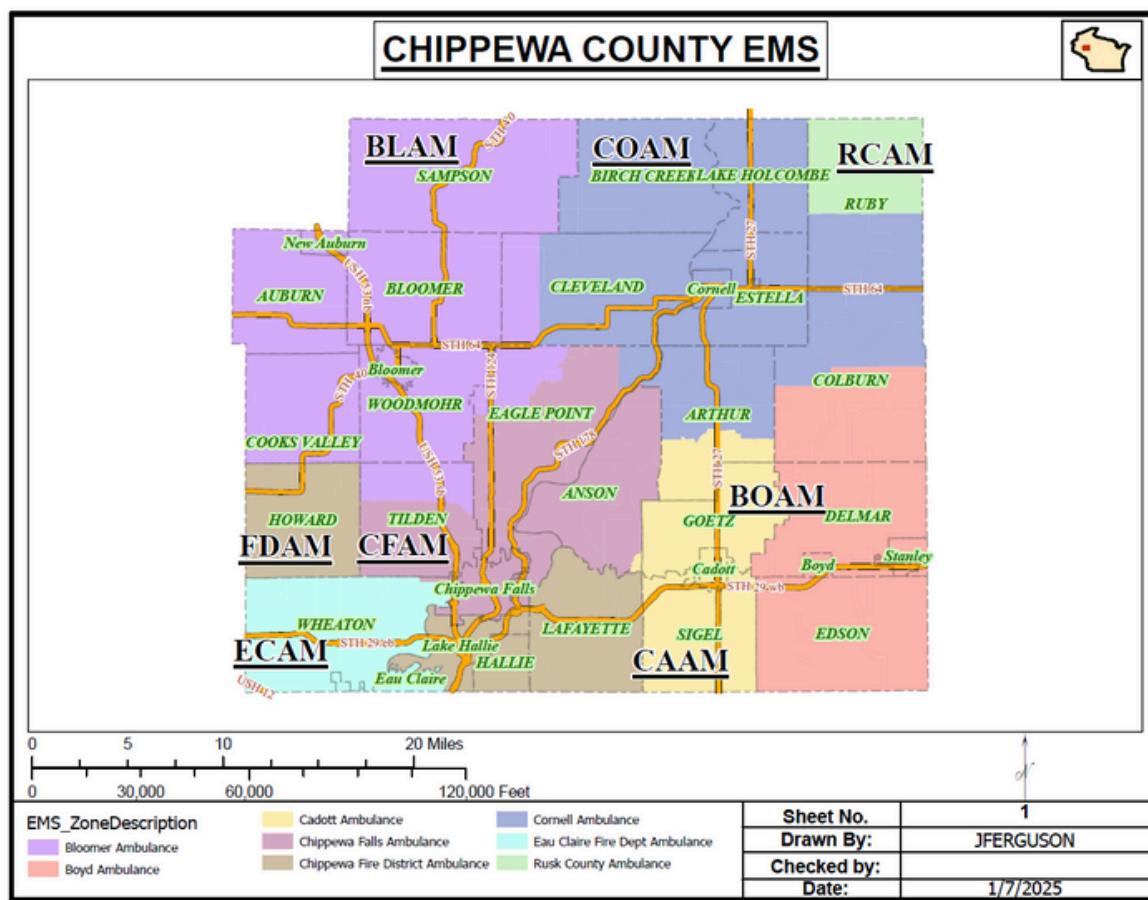
EMT

Bloomer Ambulance
Boyd-Edson-Delmar Ambulance
Cadott Community Ambulance
Cornell Rescue Squad

Eau Claire Fire & Resuce, Colfax Ambulance, and Rusk County Ambulance provide service in portions of Chippewa County

Non-transporting

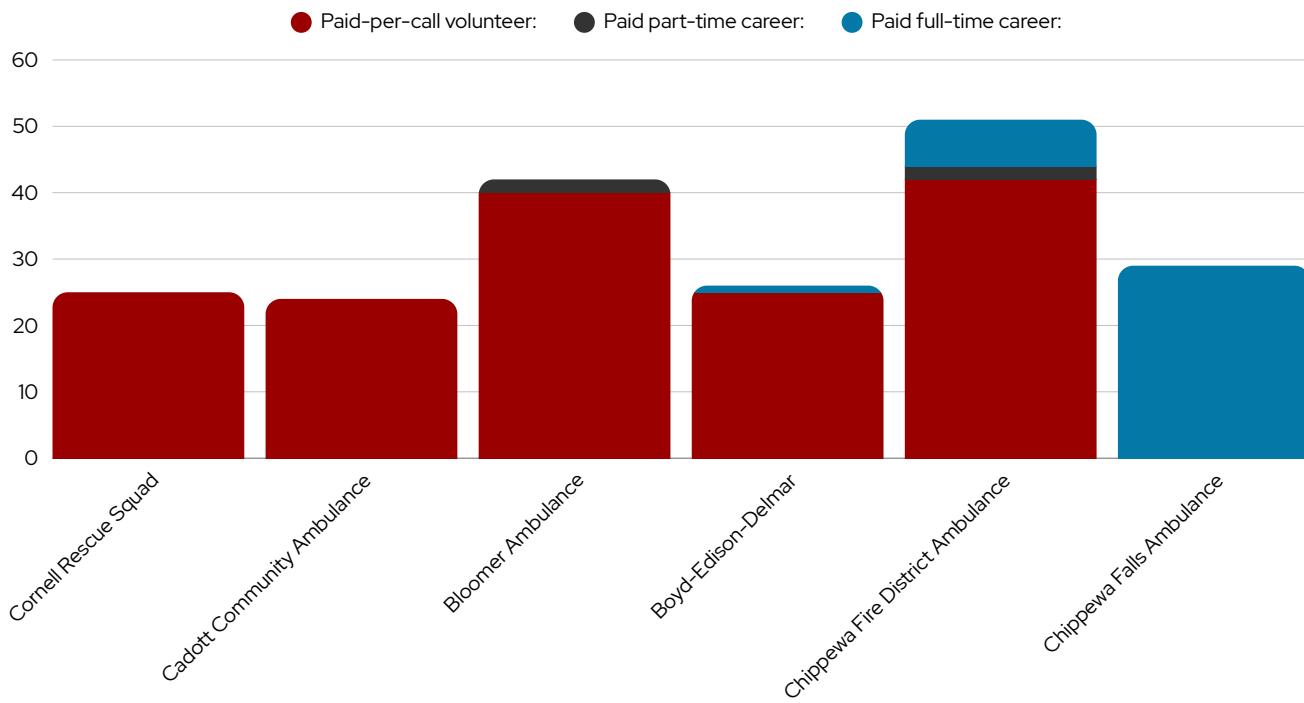
Anson (Town Of) First Responders
Bloomer Area First Responders
Eagle Point Fd First Responders
New Auburn Area Fire Dept First Responders*
Stanley Fire Department
Tilden (Town Of) Fire Department First Responders
Wheaton (Town Of) Fire & Rescue*



Current Rosters

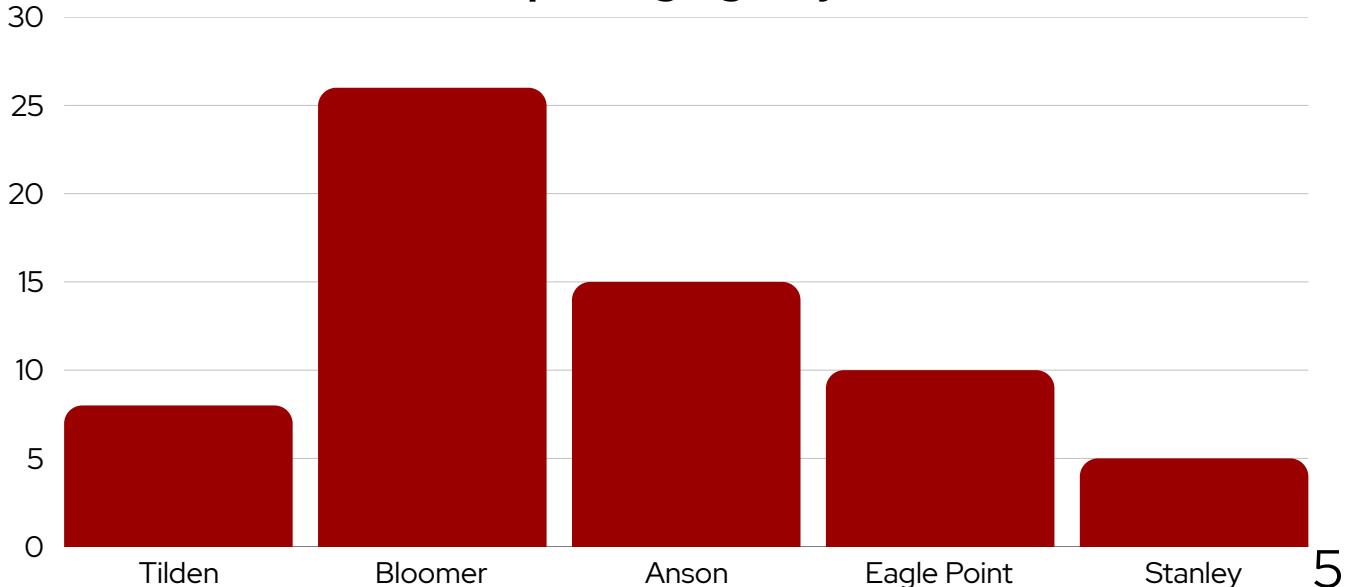
The majority of transporting agencies in Chippewa County are volunteer-driven. Rural EMS agencies rely on all, or nearly all volunteer. Notably, Chippewa Fire and Bloomer Ambulance have the **largest** rosters.

Transporting Agency Rosters



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Non-Transporting Agency Rosters

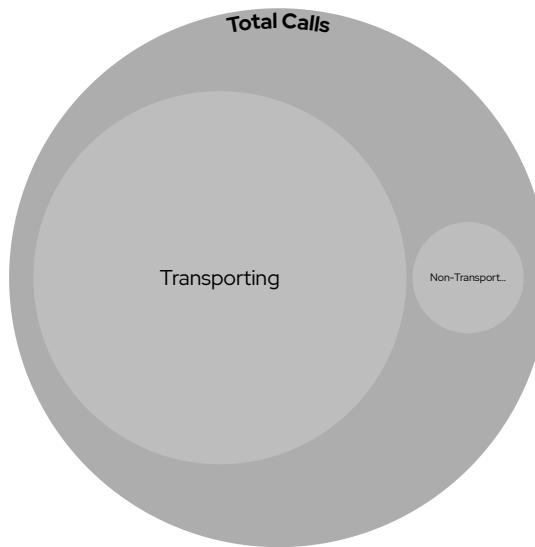


Call Volumes

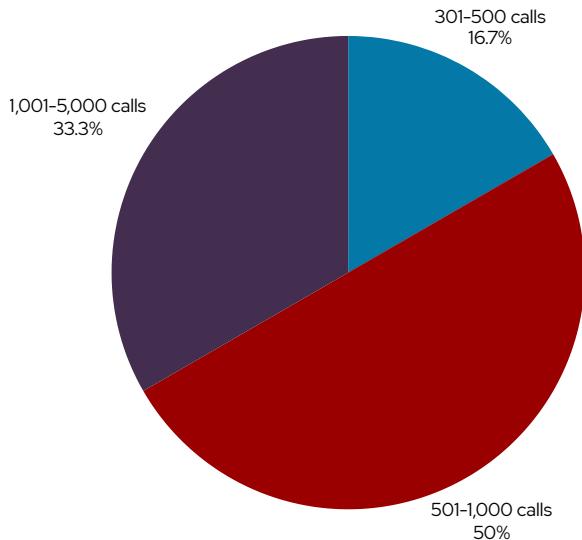
Participants were asked to share their estimated annual call volume.

Based on rough estimates, non-transporting (EMR) agencies respond to 1/10 of the calls that transporting agency respond to. Transporting agencies respond to roughly 13,000 calls annual, and EMRs respond to about 1,200.

Unequal Call Volumes Between Transporting and Non-Transporting

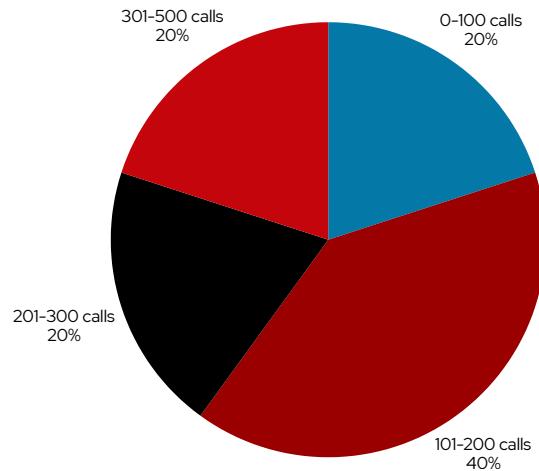


Transporting Agency's Annual 9-1-1 call Volume



For transporting agencies, the distribution of work is varied. Two agencies respond to over 1000 calls annual

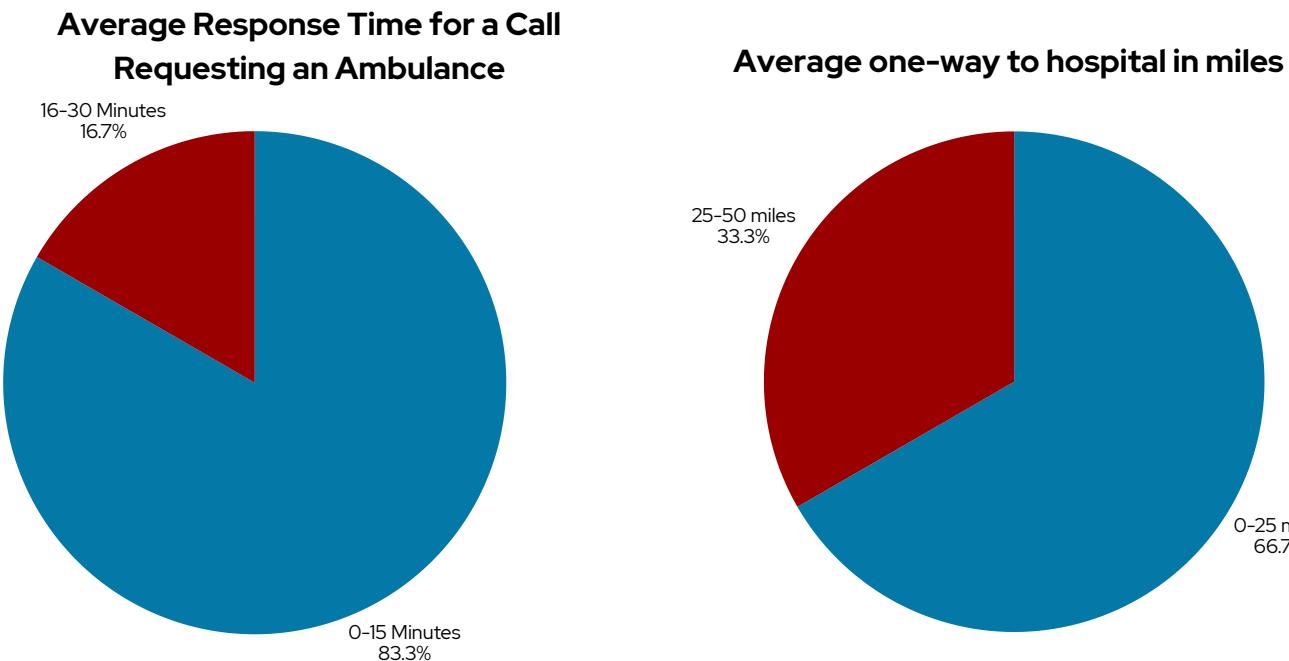
Non-Transporting EMR Annual 9-1-1 Call Volume



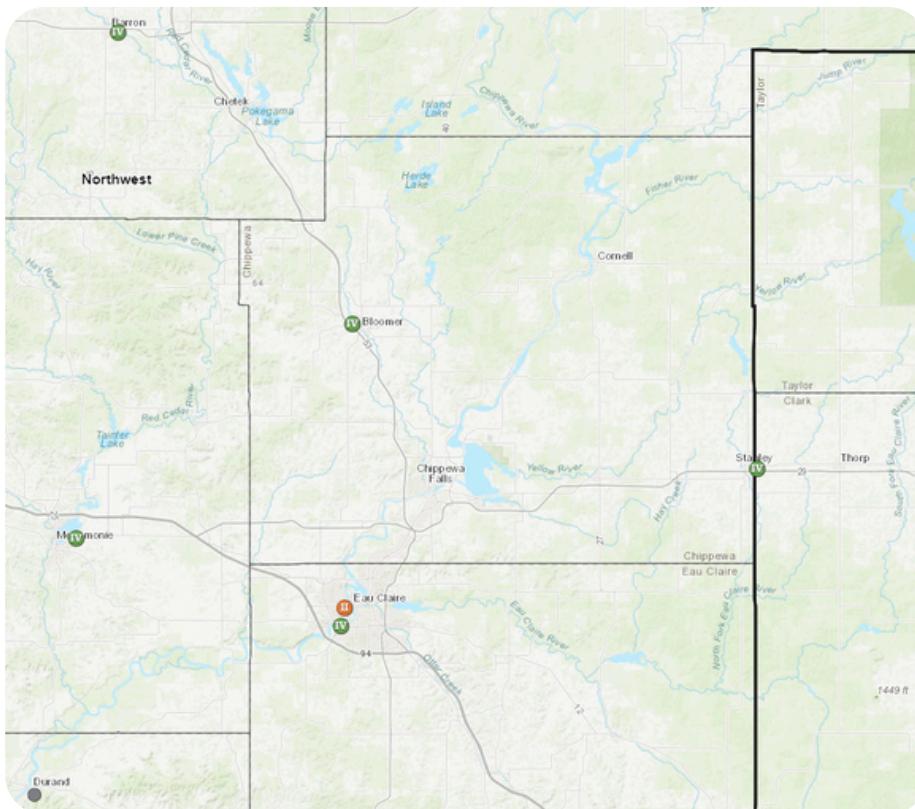
No individual non-transporting agency responds to more than 500 calls, the median agency respond to 150 calls.

Response Time and Distance

Agencies reported responding to calls within 20 minutes, with the majority responding within 15 minutes. Most agencies travel fewer than 25 miles to get transport to a hospital. Notably, since the closure of Saint Joseph's Hospital in Chippewa Falls (Level III Trauma) distance increased.



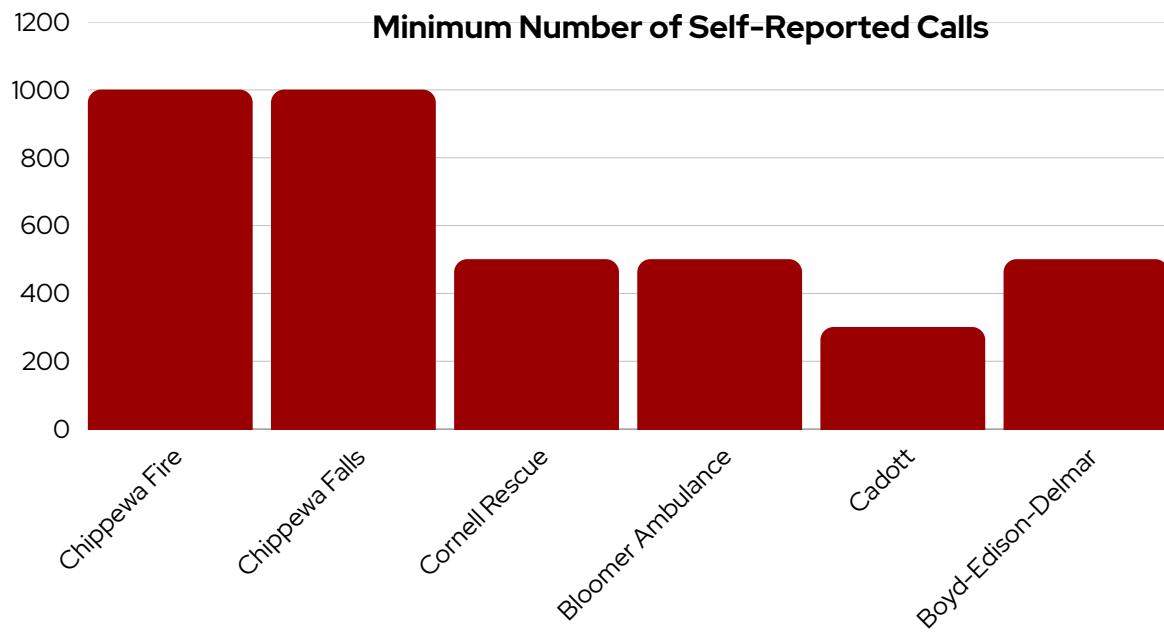
Trauma Centers in The Chippewa Valley



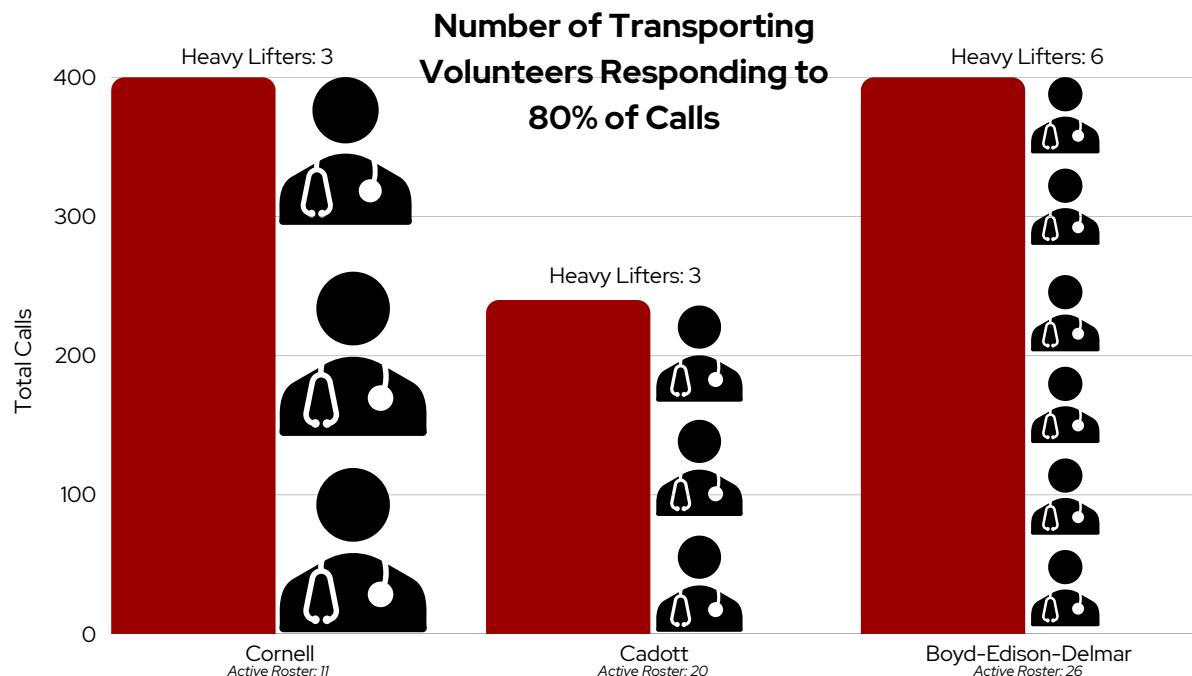
There are only two trauma centers in Chippewa County (Bloomer & Stanley). Both are Level 4 trauma centers, which provide basic emergency department facilities. The only high level care in the region is Mayo Clinic in Eau Claire (Level 2)

Staffing Sustainability and Call Response

Participants provided data regarding call volumes and roster sizes. This information is vital, as previous research indicates that agencies with fewer than eight regular volunteers are at risk of missing calls. First, agencies reported their response numbers; the table below highlights these approximate call volumes.



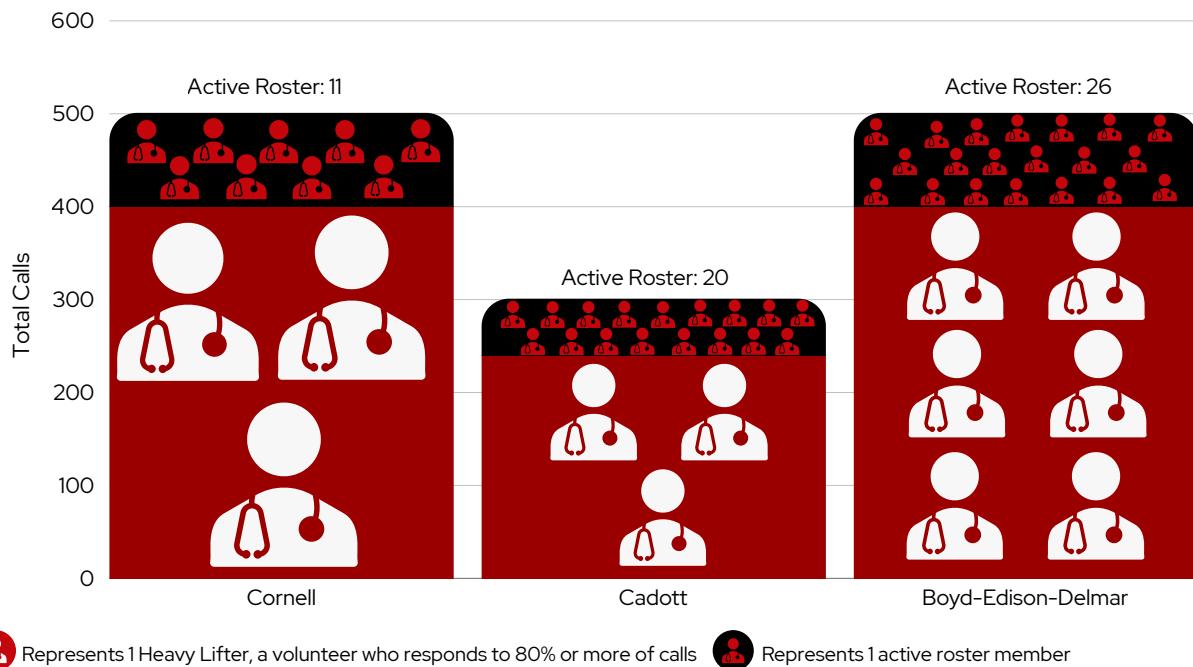
The data reveals a concerning trend: three agencies reported that fewer than eight members respond to 80% or more of their total calls. This statistic is critical because agencies relying on such a small number of committed volunteers are significantly more prone to missing calls and fostering high rates of responder burnout.



Represents 1 Heavy Lifter, a volunteer who responds to 80% or more of calls

When comparing the call volume to these agencies compared to their active roster, the disproportionate effort by few volunteers becomes evident, and represents a lack of engagement among many members

Breakdown of Transporting 9-1-1- response



Represents 1 Heavy Lifter, a volunteer who responds to 80% or more of calls



Represents 1 active roster member



Unmutual Aid

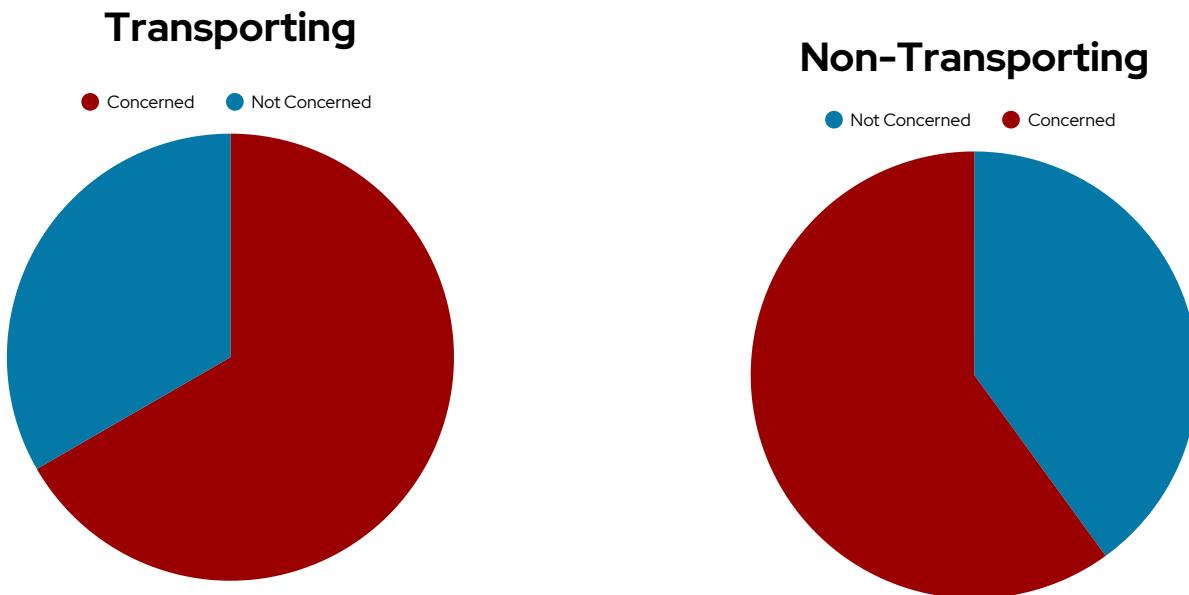
Agencies were asked to report mutual aid requested from their service area and mutual aid given from their agency (regardless of mutual aid agreement). Estimates indicate that providers under estimate the number of calls agencies (especially Boyd-Edison-Delmar and Chippewa Fire) are conducting in their service areas.

	Assistance Requested	Assistance Given
Bloomer	5	10
Boyd-Edison-Delmar	0	50
Cadott	10	10
Chippewa Falls	0	25
Chippewa Fire	50	50
Cornell	10	10
Total	65	155

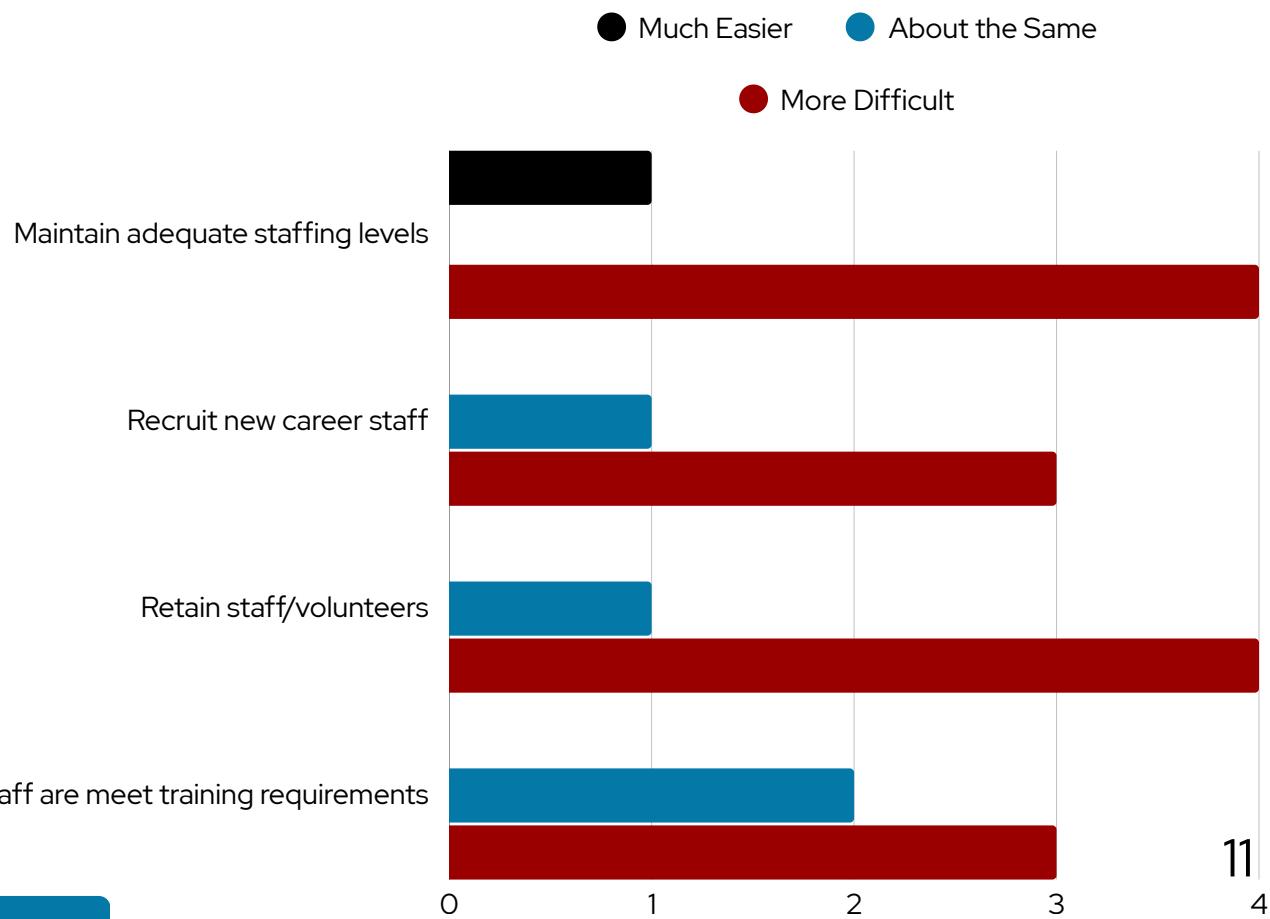
Gap of at least 90 calls

Future Challenges

Finally, participants were asked about operational difficulties. Transporting agencies are more concerned about their ability to staff their operations than non-transporting agencies, though both are concerned.



Transporting agencies were asked about the level of difficulty accomplishing several operational functions, and most found these more difficult compared to 2019.



Stress on Agencies

Not enough individuals interested in working a full-time job, take care of family commitments, going to training for 2 hours away from their home for 3 or 4 hours of training, and then drive 2 hours back home and get some sleep and back to their regular job at 6AM. Let alone complete assignments on a computer with limited bandwidth let alone share with a family member doing school work for the next day.

More money will be needed for payroll and operating expenses. The days of volunteerism is gone for the most part, so to continue providing EMS services will cost more.

We simply need staffing, we have adequate support from our boards and community's on the financial aspects

It has been very difficult to recruit and retain employees at the career level and even more difficult at the volunteer level. Increased call volume and increased costs are creating additional expenses and the collection rate isn't keeping up. An aging population and mental health is creating a considerable amount of those patient contacts.

Appendix

Ambulance Information

Mileage

Average Mileage: 110,000

Fewest Miles: 5,000

Most Miles: 250,000

Age

Average Model Year: 2017

Newest: 2024

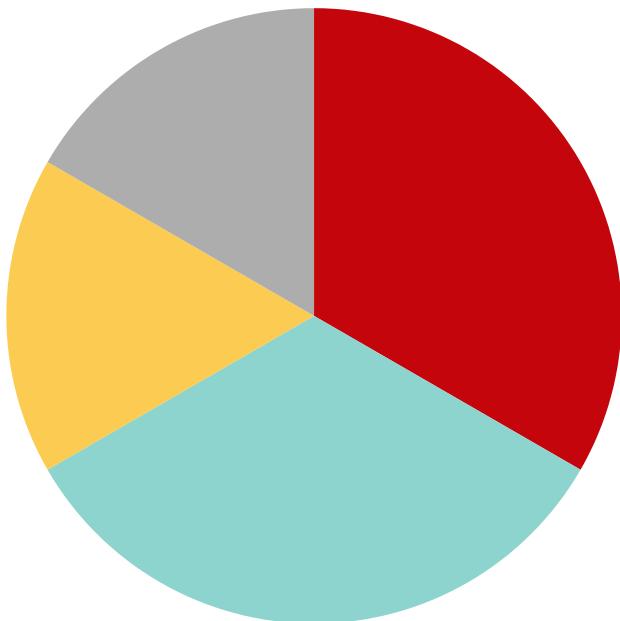
Oldest 2007

Agency	Staffed Ambulances	Number of Ambulances
Bloomer Ambulance	1	3
Boyd-Edson-Delmar Ambulance	1	2
Cadott Community Ambulance	1	2
Chippewa Falls Ambulance	3	4
Chippewa Fire District Ambulance	2	4
Cornell Rescue Squad	1	2

Financial Reserves

Transporting Agencies

- Less than 3 months
- 3-5 months
- 6-12 months
- No



EMR Agencies

- 6-12 months
- No

