



701 East Broadway, Columbia, Missouri 65201

Department Source: Fire

To: City Council

From: City Manager & Staff

Council Meeting Date: December 15, 2025

Re: Appropriation of Funds for medical supplies to support the Fire Paramedic Pilot Program

Impacted Ward: Citywide

Executive Summary

Staff has prepared for Council consideration an ordinance authorizing the appropriation of \$133,500.00 from the General Fund into Fire Administration to purchase medical supplies to support the Fire Paramedic Pilot Program.

Discussion

Fire is requesting \$133,500 to start a Paramedic Pilot Program with existing personnel. The trial will allow the department to achieve a key recommendation from the last CFAI Accreditation. We expect the trial to last up to 2-years in order to allow our physician and clinical teams to review clinical outcomes and key performance indicators. The results will guide the future of a Paramedic program for the CFD.

To support this program and meet the increasing and complex demand for EMS in the city, we request the purchase of two cardiac monitors, all needed advanced life support (ALS) supplies for two fire companies and EpiPens for all frontline apparatus. This higher level of care provided by CFD is essential to filling patient care gaps associated with several factors.

With over 9700 rescue and EMS incidents in the last 12 months accounting for approximately 58% of CFD's overall call volume and the continued growth of the City, CFD is consistently experiencing more critical patient incidents with longer ALS ambulance response times. Adding ALS and EpiPen capability will help provide timelier advanced patient care to the Citizens of Columbia.

The ambulance deployment and response of the two ALS providers in the city has changed drastically in the last few years. These changes in response and deployment all result in one critical factor, the patient is waiting longer for any critical advanced care to take place, which leads to negative patient outcomes especially in cardiac arrest events.

Both ambulance service providers are facing constant challenges such as obligations to out of city interfacility transfers, decreasing reimbursement, increasing cost for service, and routine staffing challenges. The services are staffing more basic life support (BLS) ambulances to fill the voids left by LDT's and the lack of paramedics. These BLS ambulances have less patient care capability than the ALS ambulances, especially as it pertains to critical patients. Another response gap is the increasing size of the city.

CFD is not immune to this growth, as we have struggled to provide timely service in some corners of the city. While CFD continues to build stations, the ambulance services have not expanded bases along with city growth. This non-expansion has led to long response times in

the corners of the city, many times with CFD personnel waiting for an ambulance for several minutes after arrival on scene.

CFD cannot change the ambulance and responses, but we can start to fill the patient care gaps mentioned with the addition of ALS equipment and trained personnel on responding apparatus. The location of CFD stations and the timely response of fire crews will help fill the gaps left by long ambulance response times. Fire department crews can begin advanced care for critical patients while waiting on an ALS ambulance to arrive for transport, positively affecting patient outcomes. Adding ALS capabilities will also enable timely care to critical patients in rescue situations where ambulance personnel are not trained to the level of the incident.

The department has already obtained state licensure as an Emergency Medical Response Agency (EMRA) and has the approval of our Medical Director to perform ALS skills.

We also have several advanced life support trained personnel assigned to the fire apparatus. We need to add additional equipment to the apparatus to start performing ALS skills. The plan is to run an ALS trial period at a fire company for up to two years to gather data on the ALS program, then re-evaluate the program.

Fiscal Impact

Short-Term Impact: \$133,500.00

Long-Term Impact: TBD following the two-year trial.

Strategic & Comprehensive Plan Impact

Strategic Plan Impacts:

Primary Impact: Safe Community, Secondary Impact: Inclusive and Equitable Community, Tertiary Impact: Tertiary

Comprehensive Plan Impacts:

Primary Impact: Livable & Sustainable Communities, Secondary Impact: Mobility, Connectivity, and Accessibility, Tertiary Impact: Inter-Governmental Cooperation

Legislative History

Date	Action
7/15/2024	ORD # 025722 - MOU with The Curators of the University of Missouri to establish guidelines of cooperation relating to Fire's first response emergency medical care, basic life support, and advanced life support services.
7/1/2024	RES # 123-24 – Agreement with CH Allied Services to establish guidelines of cooperation relating to Fire's first response emergency medical care, basic life support, and advanced life support services.

Suggested Council Action

Staff recommends approval of this ordinance to appropriate the funds.