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Dear Friends,

Welcome to our Summer 2025 issue of Dispatches!

The past few months have been turbulent times, filled with volatility, disruption, divisiveness, and in some cases despair. We hope you find this issues of Dispatches to be a welcome relief from all of that. In these pages, you will read stories of kindness, generosity, resilience, leadership, and collaboration. It's the story of LifeFlight of Maine.

You will learn how LifeFlight is preparing to meet the challenges that are unfolding for healthcare in Maine and how you can help be part of that rising tide, lifting us all to new heights.

As summer approaches and the state swells with visitors from around the world, we have the opportunity to showcase just how special Maine is. After all, we have lobsters, lakes, lighthouses, L.L.Bean, and another important "L" brand: LifeFlight of Maine.

LifeFlight of Maine is more than just helicopters. We play a pivotal role in Maine's healthcare ecosystem. With our fleet of helicopters, an airplane, and critical care ground ambulances, we can reach 90 percent of Maine

Sincerely,

communities within 45 minutes. We are ready to go at a moment's notice, 24 hours a day, 7 days a week.

Last summer, we transported 781 patients from communities all across Maine, which is an average of one patient transported every 2 hours and 49 minutes. Although every patient story is unique, the one thing they all have in common is that when they woke up that morning, a LifeFlight transport was not on their mind. But being there for you is always on our mind.

At LifeFlight of Maine, we have been leading the way in critical care transport for almost three decades — it is in our organizational DNA. This is an important moment for Maine, and LifeFlight is ready.

We thank you for playing a vital role in our mission. Your generosity sustains our fleet, equips our medical teams, and ensures that when the next call for help comes, we are ready — just in case one of those patients is your family, your neighbor, or your friend.

on loci cry,

Joe Kellner, CEO LifeFlight of Maine Kate D'Hallon.

Kate O'Halloran, Executive Director The LifeFlight Foundation

The Chain of Survival Strained but not Broken



In 2015, LifeFlight of Maine transported 1,633 patients. In 2020, LifeFlight transported 2,130 patients. In 2024, LifeFlight transported 2,743 patients. LifeFlight is expected to exceed that number

significantly in 2025.

During those same years, ten hospitals in Maine closed their labor and delivery services. Many hospitals reduced services offered, decreased available staff, or delayed facility repairs or equipment upgrades for lack of funding. One hospital closed entirely. A June 2025 report from the Center for Healthcare Quality and Payment Reform stated that 12 of Maine's 24 hospitals that are considered "rural" are at risk of closing (50 percent), with five of those at "immediate risk." Similarly, EMS services across the state have been stretched, downsized, dispersed, and shuttered. The Maine Legislature's Blue Ribbon Commission on EMS in 2022 estimated that there is a \$70 million annual shortfall across EMS agencies statewide. These financial challenges far exceed any individual hospital or EMS agency. They are structural, national, and highly complex.

For patients, especially those in more rural parts of the state — which is most of Maine — that means traveling farther than they had to ten years ago to get the care they need. When calling 911, it may take an ambulance crew longer to reach them than it would have in a previous decade. As anyone who has ever been injured in the backcountry or waited for hours in an emergency room can attest, those minutes can feel interminable. For the most critically ill and injured people, time can have adverse effects on healthcare outcomes.

The healthcare environment in Maine is challenged, which puts pressure on all providers, including LifeFlight of Maine, which plays a critical role in connecting people to the care they need. A multitude of factors is contributing to the current

situation: funding in general, the high cost of healthcare, public policy, population demographics, labor shortages, and even a lack of affordable housing.

Rural medical services, both pre-hospital (EMS) and in-hospital, rely heavily on reimbursements from Medicare and MaineCare (Maine's Medicaid program), which have not kept pace with increases in healthcare costs. In many cases, providers are reimbursed for services at a loss. Maine holds one superlative among the 50 states which uniquely contributes to this challenge: its population is the oldest in the country, which also means it has the highest percentage of Medicare beneficiaries relative to its population — 26 percent. "Some of this is good news," says a 2024 report from the Maine Department of Administrative and Financial Services. "People are living longer. Maine saw its largest increase as a share of the population in the 75-79 age group." But an older population also means more healthcare.

Labor shortages in Maine in recent years are well documented, whether in hospitality and tourism or in healthcare. This, too, is creating challenges for Maine's medical system. A 2024 study by the Maine Nursing Action Coalition estimated that by 2030 Maine will be short 2,800 nurses. Even if schools in Maine could train more nurses and had students to fill those spots, recruiting those nurses to work in rural hospitals isn't straightforward. Like qualified nurses, housing is also in short supply in Maine. Speaking in May 2025 on a panel at Colby College hosted by The Maine Monitor, Michael Tyler,

One of LifeFlight's new critical care ground transport ambulances.



who is a managing partner of Sandy River Company, a real estate firm, and chair of the board of the Maine Health Care Association, said: "If people can't afford to live here, how can we expect to increase the workforce? It is impossible." To compensate, hospitals turn to traveling nurses to fill critical staff positions, which is considerably more expensive and not a viable long-term solution to the challenge.

So, where does LifeFlight of Maine come into play, and why has it seen such significant increases in its services?

The simple answer is mathematic: an older population increases demand for healthcare services as economic forces diminish the supply of those same services. Less access to healthcare, particularly primary care and early interventions, leads to more sick people and to people who are sicker.

"Smaller hospitals are seeing an increased volume of higher acuity patients more often," said Patrick Perrault, clinical base manager for LifeFlight's Lewiston base. "The volume of critically ill patients is taxing these places." As a critical care transport provider, LifeFlight

essentially operates mobile ICUs. One critically ill or injured patient can occupy all the resources of a smaller community hospital. These facilities rely on LifeFlight to provide backup and move those patients to larger medical centers offering healthcare services to match the patient's needs.

Patrick, a Maine native, has worked as a flight nurse at LifeFlight of Maine since 2013. He has transported a patient from every single hospital in the state. He worked for LifeFlight through the pandemic. He has seen Maine's healthcare landscape shift firsthand. He's aware of the research, and he also sees it on shift with the flight crew. "The other piece

of it is that people are just getting older," Patrick said. "People seem sicker than they used to be."

As the headwinds facing Maine's healthcare system continue, LifeFlight expects the demand for its services to continue to rise. From January through April 2025, LifeFlight transported a patient on average every three hours and 14 minutes — and that was before the summer season began, when demand for LifeFlight's services further increases. In May, LifeFlight experienced multiple days in which it transported more than a dozen patients and covered more than 1,000 miles in a 24-hour period.



A LifeFlight helicopter taking off from a hospital with a patient on board.

There is no singular solution to these challenges. Maine's hospitals and EMS agencies are full of highly skilled, compassionate, and dedicated clinicians who work tirelessly to provide the best care they can for patients. Maine's healthcare leaders are creative, frugal, and staunch advocates for building a better healthcare system for Maine. Maine needs more investment in healthcare. needs innovation. it and "Innovation has been at the core of LifeFlight's genome since our inception," said Thomas Judge, the founding executive director

of LifeFlight. "We were established to address the gaps in critical, time-sensitive care, and we have always responded to the constant shift in needs of Maine's patients with new therapies in cardiac, stroke, pediatric, neonatal, and respiratory care and by filling gaps in the chain of survival when minutes matter."

Maine's healthcare system will look different in the next decade than it does today — hopefully, it will be much stronger. LifeFlight will continue to lead, as it always has, with the speed, dedication, compassion, and commitment to excellence that the people of Maine deserve. The one thing that does not change is LifeFlight will be there when needed.

Since it was founded in 2003, the LifeFlight Foundation has raised more than \$46 million from nearly 18,000 donors. We extend our sincere thanks to those of you who have supported us, and hope you will continue to while encouraging others to do so as well.

This is our moment to take care of Maine.

A One-Year-Old's Birthday Fundraiser

Why Rebecca and Doug Thompson Support LifeFlight



The Thompson family's first air medical transport was in 1986 in Massachusetts, when Rebecca and Doug's son Jack was born. Jack arrived nearly a month before his due date and was flown by airplane from the hospital where Rebecca delivered to Boston Children's Hospital for intensive care. Rebecca and Doug say the experience made them aware of the importance of these services. They were grateful for the swift care and hoped never to need it again.

The Thompson family's second air medical transport was in Maine in 2024. This time, Rebecca and Doug were grandparents, and Jack's son Henry, their fifth grandchild, was transported in a LifeFlight of Maine helicopter from Rockport to Bangor immediately after he was born.

Rebecca and Doug, who live in Lincolnville, say they were familiar with LifeFlight before Henry's transport. They had previously supported a family member who participated in what was formerly the Islesboro Crossing, now the Cross for LifeFlight, which raises funds to support LifeFlight of Maine. They donated, knowing the importance of LifeFlight's mission.

"You just don't know when your donation is going to help someone you know, or a family member. Hopefully not, but it doesn't matter. I feel those of us who can afford it have a responsibility to help support organizations that do so much good," Rebecca said in a recent conversation.

In 2023, Rebecca and Doug celebrated the news that their son Jack and his wife, Anne, were expecting a child. On April 18, 2024, after almost two days in labor, Anne gave birth to Henry by emergency C-section at MaineHealth Pen Bay Hospital in Rockport. Due to complications with his birth, doctors were concerned that the newborn did not get enough oxygen and his brain could swell.

"They decided it was best to be cautious, and there happened to be a LifeFlight ambulance in the area, in striking distance, with that equipment on board. So, that was the first wonderful, serendipitous thing that happened," said Rebecca. The LifeFlight crew in the ambulance brought the equipment to the hospital and prepared Henry for his flight.

Rebecca said Henry was transported by LifeFlight helicopter to Northern Light Eastern Maine Medical Center in Bangor where he was admitted to the NICU. Her grandson's transport reminded her of 39 years ago, when her son was flown to Boston.

"Since we had such a similar experience ourselves with Henry's dad almost four decades ago, it definitely triggered some anxiety from me, but I knew it was the best solution possible," she said. Both Henry's parents and grandparents were confident he was in good hands with the LifeFlight team.

"These are people who have my son and daughter-in-law's baby's best interest at heart and thank God for them, that they were there when they needed it. You don't expect it, but certainly when you are a recipient of that kind of care, it's just amazing. Your gratitude is boundless," said Rebecca.

"I think we were just very grateful that he was getting the best care available, as quickly as possible, which is what you hope for in any existential crisis," added Doug.

Henry spent about two weeks in the NICU. Surrounded by his parents and his grandparents, the infant grew stronger by the day and was eased off his medications. When he was discharged, he returned home to Lincolnville Beach with his parents to continue to grow and gain strength.

"Doug and I are forever grateful for LifeFlight's life-giving services and care," said Rebecca.



One-year-old Henry with his grandparents Rebecca and Doug.



Henry as an infant with his parents, Jack and Anne.

A year later, to celebrate his first birthday, Henry's parents asked friends and family to make donations to LifeFlight in his honor. Rebecca and Doug jumped at the opportunity to give back to the organization that helped their grandson.

"That's all I needed to hear. I just thought, what a great investment! What a great service! We have such a large state. People are spread out, and hospitals are closing, and these are challenging times. It's just so important for those of us who can afford it to make a generous donation," Rebecca shared.

As she prepared for one-year-old Henry to come over for the evening, she spoke about the activities she had planned for her youngest grandson. She was delighted to spend time with him, and expressed her gratitude for everything that was done so that Henry could live a full, happy, and healthy life.

A







Left: Stacie Newman (second from left) and her family. Right: Sophie Newman. (photos courtesy of Stacie Newman)

"They picked me up and took me to the hospital in Calais," Stacie recalled.

While Stacie was in the ambulance, administrators at Calais Regional Hospital arranged for a LifeFlight helicopter to transport her to Northern Light Eastern Maine Medical Center (EMMC) in Bangor. Stacie needed a higher level of care than was available in Calais, which does not have inpatient obstetric services.

A LifeFlight crew consisting of pilot Dustin Smiley, flight nurse Denise Saucier, and flight paramedic Stephen Levins was dispatched from Bangor and arrived at the hospital around the same time Stacie did. The medical team was briefed on Stacie's condition and loaded her into the helicopter to transport her to EMMC.

There was not enough room in the helicopter for Zach, who, as most dads, wanted to take part in their daughter's birth. So, he drove the 95 miles from Calais to Bangor with a friend, while Stacie took to the sky with the crew in green flight suits whom she had just met. "I was scared to fly," she admitted.

While in the air, the LifeFlight crew stepped in to offer both medical care and emotional support for the nervous expecting mother.

"I remember getting in the helicopter and Denise, the flight nurse, held my hand the whole time," said Stacie. "They put night vision goggles on me, which was super cool, so I got to look out the helicopter window with those on which was awesome. They knew how anxious I was and this was a bit of a distraction."

The drive to Bangor can take an hour and a half

from Calais. In a LifeFlight helicopter, the crew got to the hospital in about thirty minutes. "If we didn't have LifeFlight, it could've been bad," said Stacie.

Since her husband had to drive, Stacie knew there was a chance he might not make it in time for the birth of their daughter. When the crew landed in Bangor, Denise offered to stay with her until Zach arrived. "Denise was just so supportive; I really loved her. She made my experience so much better," said Stacie.

Within a half hour of landing at EMMC, Stacie underwent a C-section. Fortunately, Zach arrived just as she was being brought in for the procedure. Their daughter Sophie was born at 7:30 PM that evening, weighing seven pounds and nine ounces.

Stacie, who is originally from South China, Maine, says access to healthcare is more limited in Calais. Leading up to Sophie's birth, she had to drive more than a half hour to go to her obstetric appointments. When she lived further south, there was more access to doctors, hospitals, and specialists, she said. Fortunately, when she needed to get to a higher level of care at a moment's notice, LifeFlight stepped in to help.

"We're very lucky to have LifeFlight," Stacie said. "They were just amazing."

Today, Stacie is back at work as a medical assistant at a doctor's office in Calais. The family of five enjoys spending time together, along with their two dogs. "I'm not a very exciting person," she said with a laugh, "I'm really boring." But with three young children, Stacie is absolutely fine with "boring." She is grateful for both her family and to LifeFlight.





Photo, left to right: Joel Russ, Grateful Patient Team Member; Denise Saucier, flight nurse; KC Ford, Grateful Patient Team Member and LifeFlight Foundation Board Member; Charlotte Duncan, flight paramedic.



AUGUST 2025

Pick your mission. Cross Maine. Save Lives.

The Cross for LifeFlight makes LifeFlight of Maine's mission possible.

Help us raise critical funds by spending some time outside this August doing the activities you love most! Walk, bike, hike, run, swim — however you move, your miles matter.

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Two LifeFlight Clinicians Step into Leadership



LifeFlight recently promoted two of its veteran flight nurses to serve as Clinical Base Managers. Patrick Perrault, who has been with LifeFlight since 2013, now leads the clinical team at LifeFlight's Lewiston base. Brandon Mayo, who joined LifeFlight in 2020, now leads the clinical team at LifeFlight's Sanford base. Over the years, these two clinicians have cared for hundreds of LifeFlight patients, and have been through extensive training, which is one of the prerequisites of becoming a LifeFlight clinician.

Brandon is originally from Worcester, Massachusetts. He graduated with a nursing degree from the University of New England in 2015. After working briefly for DHART, LifeFlight's peer air ambulance service based in New Hampshire, Brandon moved back to Maine to join the LifeFlight team in 2020.

"My biggest goal as a clinical base manager is to support the crew, support the team, and give them the tools they need to succeed," said Brandon. LifeFlight is set up to make sure every crew, on every shift, has the resources and support they need to provide the best possible care for patients. The entire company, including managers, remains focused on this mission.

Patrick, who grew up in Norridgewock, Maine attended St. Joseph's College in Standish. After graduating, he worked at MaineGeneral Medical Center in Waterville in the ICU, and then in MaineHealth Maine Medical Center's cardiac ICU. He joined LifeFlight in 2013.

Patrick said he always wanted to be in management but was waiting for the timing to be right. When the base manager position became available this year, he said his colleagues at LifeFlight encouraged him to apply. "Over the 12 and a half years of being here, I've trained a lot of people, so I've got a good relationship with a lot of clinicians here. I think it was a natural transition into this role," said Patrick.

Like all LifeFlight clinicians, Brandon and Patrick have received comprehensive clinical training while at LifeFlight. When they were first hired, they completed hundreds of hours of intensive, full-time orientation on a wide variety of medical and aviation disciplines. The training included LifeFlight's Critical Care Academy, where the clinicians gained more experience with certain highly technical skills, such as intubation and airway management. All clinicians, including Patrick and Brandon, continue to develop these skills every day on the job and take part in new trainings as they arise.

They will both continue to work some clinical shifts in addition to their new responsibilities as base managers. Patrick said already having a grasp on the day-to-day roles of clinicians helped to make the transition to a leadership role easier.

"The training we have is intense when we first get hired as a clinician," said Brandon. "What I think the orientation does is set us up not only for success as a clinician at LifeFlight, but also for success in all aspects of our lives. It really teaches problem solving," explained Brandon, who added that he now applies some of the leadership and critical thinking skills he









LifeFlight's airplane landing at Old Town Municipal Airport; photo courtesy of fixed wing pilot Brian Dunn.

learned in his initial training as a LifeFlight orientee to his work as a manager.

In their new roles, Patrick and Brandon are continuing their clinical training while also developing their leadership skills. Patrick is enrolled in the Association of Air Medical Service's (AAMS) Medical Transport Leadership Institute, a two-year program based out of West Virginia. The program is geared toward developing leaders in critical care transport. Brandon will start the course next year. The two base managers are also enrolled in local leadership courses at Southern Maine Community College.

"We know we have the support of senior leadership and they are to helping grow into this new role. Neither of us have much formal prior management experience," said Brandon.

Joe Kellner, CEO of LifeFlight, knows the importance of a highly skilled team. "I'm excited for Patrick and Brandon to step into these news roles," Joe said. "They are excellent clinicians and have a lot to

offer our team and our patients. For years, they have led by example informally. Now they have the opportunity to help recruit, train, and lead their clinical colleagues at LifeFlight."

"We need our crews happy and healthy so we can help people," said Brandon. "We need to take care of our own, so we can take care of others is kind of my philosophy, and I think LifeFlight has done a lot of that. We're focusing on mental health. We're focusing on equal pay for nurses and paramedics doing the same job," he added.

Patrick and Brandon both say they are excited for this new role within the organization. They are grateful for the opportunity to lead, humbled by the trust placed in them by their colleagues and senior leaders, and eager to make a difference. Their success represents the success of LifeFlight's investment in training and leadership development, and they are exactly the kind of people that the EMS system in Maine needs.

They are executive cumulants and make a local to

more than just helicopters.

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Dispatches is a publication of The LifeFlight Foundation, which provides fundraising and public relations support to LifeFlight of Maine, the state's only air ambulance service.

The LifeFlight Foundation is a nonprofit, tax-exempt organization under Section 501 (c)(3) of the Internal Revenue Service Tax Code. It is governed by an elected board of trustees who represent medical, business, legal, and educational fields throughout the state. The Foundation also supports the development and funding of Maine's major air medical needs, such as trauma training statewide; construction of hospital helipads; and installation of weather reporting, navigational, and communications systems.

The Foundation's office is located in Augusta,

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