

REGION 3 – CAPITAL AREA, SOUTHERN NY

BERLIN VOLUNTEER FIRE COMPANY, Rensselaer County, was assessed a \$2,000 civil penalty by the NYS Department of Health on 6/4/13 for violation of Public Health Law Article 30 Section 3005. That section deals with ambulance service operating certificates. The Berlin Rescue Squad operates at the BLS level.

CARE1 EMS, Fishkill, Dutchess County, has been acquired by EMStar, a Philadelphia based ambulance company owned by Joseph Zupnik and Daniel Herman since January 2011. News sources indicate the business partners are also principals in Focus Ventures, based in Airmont, NY, which operates long-term-care facilities, assisted-living centers, medical day-care programs and senior housing complexes in and around New York City. Care1 EMS operates approximately 20 ambulances and 1 flycar in Dutchess, Orange, Putnam, Ulster and Westchester Counties providing BLS and Critical Care transports services, as well as covering several 911 jurisdictions in Dutchess, Orange and Westchester Counties. Before the beginning of 2011, Care1 EMS was operated under several different names including Regional EMS, Hudson Valley Paramedic Services and Hudson Valley Ambulette. In early April some type of issue cropped up and action was taken to suspend Care1's ALS level services. With new management, ALS service resumed.

COLUMBIA COUNTY Board of Supervisors on 12/28/12 approved \$1.3 million in payments to 15 towns for the costs of their contracts with EMS agencies. The amounts are billed to the residents of most towns in the county on their county tax bills. Involved are Ancram, Austerlitz, Canaan, Chatham, Claverack, Clermont, Copake, Gallatin, Germantown, Ghent, Greenport, Hillsdale, Livingston, Stuyvesant and Taghkanic. According to county officials, the towns began going through the county to pay the costs to avoid going over the state's 2 percent property tax increase limit. Three towns, Kinderhook, New Lebanon and Stockport, pay for the services directly out of their budget through special district taxes. The \$1.31 million will be divided amongst the Chatham Rescue Squad, Community Rescue Squad in Copake, Greenport Rescue Squad, Northern Dutchess Paramedics and Valatie Volunteer Rescue Squad.

MOUNT KISCO VOLUNTEER AMBULANCE CORPS, Westchester County, celebrated on 6/8/13 the addition of a new ambulance to its fleet, Unit 70-B2. The vehicle is a Type III 2012 Ford E450 with a PL Custom Medallion patient module and replaces a 2004 Type III Ford E350 Super Duty PL Custom Gold Medallion ambulance. Mount Kisco VAC operates at the BLS level and handles about 1,300 calls a year.



RENSSALAER COUNTY agencies Nassau Ambulance and Sand Lake Ambulance are among 21 organizations across New York State which will receive grant money to help bolster recruitment and retention, according to the state Division of Homeland Security and Emergency Services. In total, close to \$400,000 will be awarded to volunteer companies. Combined, Sand Lake Ambulance and Nassau Ambulance will receive \$24,292 to help cover the costs of a television advertisement recruitment campaign and membership training in leadership and communication focused on membership retention. The competitive grant program awarded up to \$25,000 to volunteer first response organizations through the Office of Fire Prevention & Control, and seeks to support the efforts of local volunteer first response agencies to overcome the increasing challenges of maintaining the staffing necessary to protect their communities.

"The recruitment and retention of volunteer firefighters and emergency services personnel is critical to protecting public safety in the State of New York," said DHSES Commissioner Jerome Hauer. "These volunteers, in many instances, are the first to respond to any emergency in communities throughout our state, providing essential services to their fellow New Yorkers."

WAPPINGER FALLS (village), Dutchess County, renewed its contract with Mobile Life Support Services as the village's 911 EMS service until the end of 2015.

WESTCHESTER REMAC has discussed the issue of hospital diversion many times over the years. Minutes of REMAC's 5/20/13 meeting indicate "As previously decided, a second letter was sent to all the hospital CEOs advising that the REMAC would be voting to remove the option of diversion and to date

there has been no response. Discussion regarding the issue of “specialty” diversions. A number of members echoed the difficulty in providing specialists on-call for the local emergency departments without pay. Lack of specialty services may require community hospitals to “divert” patients to larger hospitals. Concern regarding parsing out the different possible sub-specialties that a community hospital may or may not have coverage for at their ER on any given day. General consensus that the categories should be limited to “time-sensitive” services, such as cardiac, stroke or trauma. Additional discussion regarding address the base problem of ED overcrowding due to “admission holds.” Suggestions made to not remove but limit the number of occurrences a month, but concerns that it would be difficult to track effectively. Many hospitals have developed observation units to shift these types of patients out of the ERs. Overall it was noted that there were negative impacts to patients and EMS related to safe operations.

A motion was made and seconded to stop the practice of honoring requests for hospital diversion unless one of the following conditions have been met:

- The requesting facility has instituted its internal disaster or emergency plan.
- There has been a temporary failure of required diagnostic equipment (e.g. CAT scan for a Stroke Center) or important facility infrastructure (e.g. utilities, oxygen system, fire, etc.)

There was discussion to potentially alter the language to include specific mention to lack of resources for management of acute cardiac or stroke. The amendment was removed and determination to defer changing the language only if it becomes necessary to revisit at a later date. Motion was passed and a letter will go out to the Westchester hospital CEOs explaining the vote and the start date of the policy change, July 1, 2013.