



THE BLANKET

THE NEW YORK STATE VOLUNTEER AMBULANCE & RESCUE ASSOCIATION, INC.

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A Message from Our President

During the winter, Executive VP Roy Sweet and I met in Syracuse with representatives of several larger hybrid volunteer ambulance services from across the middle of the state. I am pleased to report that as a result of this meeting the group decided to join our Association. They have formed their own district and will be District 15. Representing the new District are John Hussar from Union EMS in Binghamton and Jon Palitis from Calanie EMS outside Albany. The new District is a welcome addition to our Association. Thank you for joining us.



Michael J. Mastrianni, Jr.

The planning for the Convention is well under way. A tremendous amount of work has been done by the Committee. Seminar schedules are in place, vendors are registering and I believe it will be the best ever. This year we are pleased to have A.J. Heightman, editor of JEMS Magazine as our keynote speaker. I want to thank Good Samaritan Hospital in Suffern, New York for sponsoring Mr. Heightman. Information and registration forms are available on our web site www.nysvara.org or you can call 877-nysvara and the information will be mailed to you. This year, as always, we are looking for sponsors for our seminars, breaks, etc. Journal ads are being solicited as well. For more information, please contact Ralph Cefalo at wvac11357@aol.com.

I want to remind everyone that our Legislative Day in Albany is Monday April 23, 2007. This year we will be partnering with the New York State Association of Fire Chiefs. It is vitally important that everyone who has the opportunity to participate join us in Albany. We will be setting up meetings with key legislators to discuss important issues that we face. There is strength in numbers. This year the dedicated funding for EMS expires in June. It is critical that we let our elected officials know how important this funding is to us. PLEASE JOIN US! If you would like more information, please contact me at seamast@aol.com.

We are in the process of upgrading and updating our web site. I want to thank John Hussar and his company Grey Goose Graphics for helping us in this endeavor.

Vice president Henry Ehrhardt and I continue to represent the Association on the NYS EMS Council. I would like to congratulate Henry as he has been elected Chairman of the Council. It is a great accomplishment and a reflection of the hard work that Henry has done over the years as he has represented the Association on the Council.

Our great relationship continues with The New York State Association of Fire Chiefs. I have met with their senior representatives on a regular basis and we are looking at ways that we can work together more closely. Henry and I were invited to attend FASNY's EMS Conference in Montour. It was very well attended and extremely well done. During the conference we met with President Michael Wutz and members of the EMS Committee. Adam Ochs from The New York State Association of Fire Districts was also at the meeting. It was extremely productive and I believe there is a renewed sense of cooperation among all the volunteer emergency service organizations. I want to thank President Wutz and FASNY for their hospitality.

As you are aware, there is a new administration in State government. We have already seen the appointment of a new Commissioner of Health. The impact on Emergency Services

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of the NYS Volunteer
Ambulance
& Rescue Association

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and particularly volunteer EMS remains to be seen. We will continue to work with our volunteer emergency services colleagues ensure that our interests and concerns are heard.

Lastly, while much has been accomplished, there is still much work to be done. As always I want to thank everyone

NYSVARA Cookbook

As a fun fundraising effort, Kathy Hanford of District 19 has volunteered to head up a NYSVA&RA COOKBOOK project. If enough recipes are received the cookbook may be ready by PULSE CHECK 2007 in October. All types of recipes can be included (main dishes, desserts, appetizers, soups, specialties, specialty drinks, etc).

Mail your favorite recipes to Kathy Hanford, NYSVA&RA, PO Box 570064, Whitestone, NY 11357 or

for their help and support and encourage you to ask your friends and colleagues to become involved. It is because of your hard work that we continue to be voice of volunteer EMS in New York State.

Be Safe!

kahaemtcc@hotmail.com. Include your name, phone and email so she can contact you if there are any questions about your recipe. Credit in the cookbook will include your name and squad.

If you have an idea of how many cookbooks you would like to buy, please let Kathy know so she will know how many to have printed. The price will depend on the size and number of books printed.

New Rescue Standards Adopted by NYS Office of Fire Prevention & Control

On April 7, 2006, Governor George E. Pataki adopted two amendments to the Minimum Training Standards for Fire-fighting and Code Enforcement Personnel which establish minimum training and certification levels in various technical rescue disciplines and certification for Advanced Hazardous Materials Technician. These voluntary standards, which are contained in 19 NYCRR, Part 426.8 (n) (o), will allow emergency response personnel who have completed specified training to receive New York State Certification in the various titles including:

Advanced Hazardous Materials Technician, Confined Space Rescue Technician, Dive Rescue Technician, Rope Rescue Technician, Structural Collapse Rescue Technician, Subterranean Rescue Technician, Surface Water Technician, Trench Rescue Technician, Machinery Rescue Technician, and Wilderness Rescue Technician

The rescue standards are based on national criteria, specifically, NFPA 1670 - Standard on Operations and Training

for Technical Rescue Incidents and NFPA 1006 - Rescue Technician Professional Qualifications. State certification of responders within these technical rescue fields provides a baseline to measure competencies and capabilities of personnel. This is especially important since response to a major disaster is often a regional or inter-state response and is not solely dependant on local resources in the immediate area. Response personnel having the requisite technical training to perform the task at hand is critical to the success of any emergency operation.

Those wishing to apply for certifications in these new titles can download the appropriate applications at: www.das.state.ny.us/fire/certifications.htm or contact OFPC's Standards Unit at (518) 474-6746.

The adoption of the new standards represent a continuation of efforts to increase the level of training and competence in New York State's emergency responder community to provide the best service possible.

AED & CPR Changes – Additional Guidance Issued by NYS DOH

The Bureau of EMS (BEMS) issued a letter on January 19, 2007 to answer some of the most frequently asked questions raised since the State Emergency Medical Advisory Committee (SEMAC) and the State Emergency Medical Services Council (SEMSCO) accepted the 2005 American Heart Association Guidelines (AHA). Major issues covered include:

- Based on concerns forwarded to BEMS from several areas of the state, the deadline for EMS agencies to train their providers to the 2005 AHA Guidelines has been extended to July 1, 2007. Until agencies have trained all their staff to the new guidelines they should continue to use the old version of the state protocols and CPR. The updated training should take place even if the agency is unable to change their Automated External Defibrillators (AEDs) to meet the current AHA Guidelines for AEDs.
- The Bureau of EMS is not mandating the purchase of new

AEDs to meet the new standards. However, AEDs should be upgraded to meet the new standards as soon as possible. Agencies should contact their AED manufacturer to determine if their AED can be upgraded. BEMS continues to urge all agencies to have AEDs that are capable of treating all age groups.

- The new BLS Cardiac Arrest Protocol states that "a maximum of three (3) defibrillations may be delivered at the scene prior to initiating transport". This does not mean that a provider can only deliver three (3) defibrillations at the scene. If transport is not available or is delayed, you should continue to treat and defibrillate the patient if so required by the AED. EMS providers must begin transportation of these patients as soon as possible and not delay transport to perform additional defibrillations.

EMERGENCY SERVICES SOFTWARE



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Analyzing data is a very important part of managing our service. Without good data, managers and planners cannot make good decisions. As our call volume grows year after year, utilizing a computerized data collection and reporting system is not an option, but rather a necessity. I highly recommend this system."

— Timothy P. Egan, NREMT-P, Chief of Operations,
Director of Information Technology, Rockland Paramedic Services

12 Lead Capability in NYS & What are Hospitals Doing with Info?

Survey results released at the end of the summer indicate:

- Of 486 ALS agencies 264 (58%) have 12 lead capability.
- Of 1,285 ALS vehicles 544 (42%) have 12 lead capability but only 22% are capable of transmitting the info to hospitals.
- Of 102 hospitals only 40 are able to receive 12 lead transmissions through a telemetry setup. It has been noted, however, that any hospital is able to receive 12 lead information into a FAX machine if the ambulance has transmitting capability through a monitor and a cell phone.

There had been some talk that 12 lead training should be given to BLS personnel and their ambulances equipped with suitable monitor/defibrillators but the impetus has sputtered out due to the enormous costs involved as well as the realization that ALS capability needs to be pushed first.

A nationwide study announced at an American Heart Association conference in Chicago on November 20, 2006 highlighted an issue with the use of 12 lead data sent to hospitals by ambulance crews. It seems many hospitals are slow to act on information about an incoming patient and guidelines calling for a "door-to-balloon" (angioplasty) time of 90 minutes are

not being met. Measures that have been suggested to decrease wasted time include:

- Authorizing ER doctors to activate cath lab rather than wait for cardiologist review of the case
- Establishing a one call system to a central operator to activate an angioplasty team
- Having the ER activate the cath lab when medics alert them based on 12 lead analysis in the field
- Staff in cath lab within 20 minutes of notification
- Cardiologist on site 24/7
- Immediate feedback to staff on how they did on each case

The findings and suggestions re-emphasize that all links in the heart attack "Chain of Survival" from recognition to rehab are important and must work together for a positive outcome to result. About 1,250 of the 5,000 hospitals in the US do emergency angioplasties and are being invited to join the effort to decrease the time to definitive treatment by allowing the ER physician to make the decision to assemble an appropriate care team. How does your local hospital respond to notifications?

NYS DMV Ambulance Registration Fee Issues

Ambulances owned by non-government entities are not eligible for "Official" plates and in reviewing Ambulance Operating Certificate renewals the NYS DOH has been requiring independent ambulance squads to change over to "ET" type ambulance plates.

Registering a new ambulance or changing the type of registration from Official to ET type plates can present a challenge if a "no fee" transaction is sought. The DMV will only waive the registration fee if the ambulance is not a "For Hire" vehicle. Getting around the affirmation on the form DMV-197 that "no charge is made for services" can be problematic but we understand it has been done successfully by the following route:

- Ensure the MV-82 VEHICLE REGISTRATION/TITLE APPLICATION is completed properly. In Section 6 check off only

that the vehicle is used as an ambulance.

- Complete the MV-197 EXEMPT VEHICLE CERTIFICATE adding a statement that the squad is an Emergency Medical Service (EMS) and that they are not strictly "for hire" as that is not a condition of service - they respond to all and payment or ability to pay is not a factor in providing service.
- Provide an FS-20 insurance card from their insurer. This is the same form provided privately owned vehicles. For Hire vehicles are normally given a FH-10 insurance card.
- Provide copies of the squad's NYS Sales Tax Exemption form and IRS 501(c)(3) letter.

For squads that have already paid a fee to register an ambulance an MV-215 REQUEST FOR REFUND can be filed with the necessary supporting documentation.

Blue Lights Authorized for Police Vehicles

Section 375 of the Motor Vehicle and Traffic Law was amended on June 6, 2006 to allow police vehicles to utilize rear facing blue lights when engaged in an emergency operation. Studies in recent years have suggested that blue lights enhance safety during nighttime operations. Acting on this information local and state police agencies are now permitted to equip their vehicles with "one or more blue lights or combination blue and red lights or combination blue, red and white lights provided that such blue light or lights shall be displayed

for rear projection only". An additional provision requires the display of one or more red or combination red and white lights on the police vehicle red as a condition of utilizing blue lights.

Volunteer firefighters with written authorization from their Chief are still permitted to equip their personal vehicle with a blue light. Contrary to some fire department practices, the use of blue and red light combinations are not permitted on fire vehicles.



Legislative

Please join the NYSVA&RA on Legislative Day on April 23, in Albany, NY

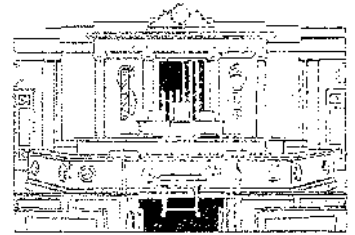
Meet with your local Assembly and Senate representatives and let them know what the volunteers in New York would like to see pass into law. 2007 Legislative & Policy Agenda Highlights:

- Emergency Medical Service Training Program Dedicate Funding
- Utility Charges
- Volunteer Emergency Services Personnel Recruitment and Retention
- College Tuition Assistance
- Real Property Tax Abatement for Volunteer Emergency Pro-

viders

- Volunteer Emergency Service Personal Tax Credit
- Cellular Phone Priority Access
- Volunteer Ambulance Service License Plates
- Coverage for Non Jurisdictional Response
- EMT Intermediate Levels of Certification

If you have any questions, contact Mike Wilhelm at (347)739-6947 or e-mail wilhelmm@nysvara.org.



Legislative Committee
Michael H. Wilhelm, Chair
wilhelmm@nysvara.org

Two Hour Wait in ER of Illinois Hospital Determined to be Homicide

The Verdict Form worksheet completed September 14, 2006 by the foreman of a Coroner's Jury in the Inquest of a 49 year old woman who died after a 2 hour wait in a hospital emergency department reads: "We, the undersigned Jurors sworn to inquire into the death of Beatrice Vance on oath do find that she came to her death on the 29th day of July 2006 at 2:00 AM at Visto Medical Center East, Waukegan, Illinois in the County of Lake. We find that her death was due to Myocardial Infarction; due to Acute Coronary Thrombosis; which was the result of 'a gross deviation from the standard of care, which a reasonable person would exercise in the situation.' Which began at 444 North County Street, Waukegan, Lake County, Illinois, on Friday, July 28th, 2006 sometime prior to 10:15 PM. From the evidence presented, we the jury believe the manner of her death to be homicide."

It is not known from the initial information on the case the manner of the patient's arrival (ambulance vs. private

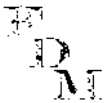

transportation). Articles in local newspapers indicate the patient complained her pain level was 10 on a scale of 1 to 10 and was unconscious when a nurse called her name for attention at 12:25 AM.

The county's State's Attorney's office is reviewing the unusual finding in the case. His initial reaction was that typically, these situations are handled in civil courts, under Illinois law there is no charge of negligent homicide and while statutes do include reckless homicide they are applied to vehicular accidents. In order to charge a corporation it would have to be shown that a controlling officer was involved. Other officials have said that the decision of the inquest does not require the filing of charges and that the State's Attorney's office is not legally bound by any decision of the coroner's jury. Hospitals across the country will be awaiting the final outcome of this case.

You Can't Make This Up

Ellis Hospital in Schenectady went on a diversion for some time on Friday, July 28th because of poisoned birds falling from the sky. On Thursday the 27th an exterminator hired by the hospital to get rid of birds on its roof used the pesticide Avitrol in a plan to poison some birds whose distress calls would drive off other birds. However, during the evening doz-

ens of pigeons started falling to the ground and workers had to be sent out to collect the bodies in red bio-hazard bags. The situation escalated into a HAZMAT incident with several people going through decon procedures. Although the ER remained open, ambulances were diverted on July 28th to other hospitals out of the way of police and firefighters dealing with the bird situation.


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State EMS Council – December 2006 attended by Henry Ehrhardt & Mike McEvoy

1. The "Suspected Spinal Injuries" protocol and a Power Point educational presentation expected out in early 2007. After much wrangling, it will hit the streets once the Bureau completes formatting changes and adds final touches to the education piece.
2. Burn Kits from the State Hospital Preparedness group have finally arrived at each County EMS Coordinators office. It's up to each County Coordinator to deploy the kits. The idea is to provide one kit for every ambulance in the State. Who's your County Coordinator -- check the Bureau listing at: www.health.state.ny.us/nysdoh/ems/counties/map.htm.
3. SEMSCO gave its approval to a newly revised and updated QI Manual written by the Evaluation Committee. Plans call for the Committee to roll out their new manual regionally in a "train the trainer" format starting sometime in the second quarter of 2007.
4. After a 90 plus minute grilling, and following some minor revisions, the new North Country ALS Protocols were approved. Also from North Country, was approval for BLS use of hemostatic bandages for serious external bleeding. North Country is the third region in New York to employ hemostatic bandages (Westchester and Nassau County already follow them). While "the jury" is still out on their exact role in the EMS, you might want to Google the topic and read up. Hemostatic products are playing an increasingly important role in surgery.
5. Remember those 8 1/2 by 11 Pediatric Prehospital Care Reference Cards that the EMS for Children (EMSC) program distributed a few years back? Well the card is undergoing revision to include the 2005 CPR guidelines and should be up on the EMSC section of the Bureau website within 2-3 weeks. Surf to: www.health.state.ny.us/nysdoh/ems/nysemc.htm.
6. The Bureau expects to shortly release a guidance document for Regional Councils and Program Agencies use in evaluating applications for Course Sponsorship.
7. Take note CICs and CLIs out there: DOH now cross checks your name against the personnel roster of the agency you list as your field experience location. If you don't appear on the personnel roster, but claim to be actively riding, you'll probably be asked for additional proof. This brings to mind a term used in previous SEMSCO notes, "filing false paperwork."
8. SEMAC voted to add ketorolac to the statewide ALS formulary for pain treatment. Ketorolac is the generic form of Toradol®, a non-narcotic agent given IV or IM for moderately severe acute pain. Although morphine is the preferred agent to treat acute pain, the hurdles needed to get morphine into ALS units and then to restock it once administered continue to make ALS systems seek non-narcotic alternatives.
9. SEMAC will advise their 18 REMACs to update their ALS protocols in compliance with the 2005 AHA/ILCOR resuscitation guidelines. Updates should be completed by January 2007. Rather than review all 18 Regional Protocol sets, SEMAC is asking each REMAC to submit a letter by July 1, 2007 confirming updates are in place.
10. SEMSCO heard presentation from the Rural Health Community Systems group in Steuben County (www.rhcsys.org) describing a needs assessment and action plan initiated to bolster EMS in their rural county.
11. The PCR might get another facelift sometime soon -- maybe! A couple new "time" boxes have been requested; one for time of call receipt at the 911 Answering Point, and one for time of First Responder arrival on scene. Prior to implementing either change, the Evaluation Committee will review the entire PCR with an eye towards conformity with NEMSIS data collection. What might actually happen is an evolution of the data set required for agencies using electronic PCRs versus any immediate changes to the paper and pencil forms.
12. Vital Signs 2006 was one of the five largest conferences ever with over 2,100 attending the show in Syracuse. The show will return to Syracuse October 18-21, 2007. Randolph Mantooth presented awards at the annual awards banquet. The 2006 awardees were: BLS Provider: John Carnes (Westchester REMSCO), ALS Provider of the Year: Vincent Coletto (Suffolk REMSCO), Agency of the Year: Dix Hills Fire Dept. Rescue Squad (Suffolk REMSCO), Leadership Award: Sharon Chiumento (Monroe-Livingston REMSCO), Educator of Excellence: Edward Mosser (Central NY REMSCO), EMS Communications Specialist: Andrew Eve (Monroe-Livingston REMSCO), Nurse of Excellence: Elizabeth Montgomery (Monroe-Livingston REMSCO), and Physician of Excellence: Erik Larsen (Westchester REMSCO).
13. Is your agency ready for a pandemic? Much of the business world has beefed up their corporate continuity plans for the unique challenges a pandemic flu might bring. To evaluate how prepared your EMS service is, take a peek at: www.pandemicflu.gov/plan/healthcare/emgncymedical.html. You might discover a thing or two you still need to do.
14. Know anyone who's failed a CFR or EMT course? Make sure they know there's a one year deadline from the date of their original written exam to pass the test. One year and one day later, they'll have to return to go and start over. The written exam can be retaken once. If a student fails the retest, they need to complete a refresher course to sit (up to two more times) for the written exam.
15. Dr. Terry Fairbanks (Assistant Professor Emergency Medicine, University of Rochester) delivered a brief SEMAC presentation on medical error reduction using a systems approach. A TAG has been formed to recommend some

(Continued on page 7)

NYS Comptroller Audit Hits Fulton County Ambulance with \$122,307 Medicaid Overpayment

The Comptroller's office is authorized by the State Constitution and State Finance Law to audit Medicaid ambulance claims. However selected, Fulton County Ambulance in Gloversville came up for review. Audited were selected Medicaid payments over a five-year period. The audit found that the provider was overpaid a total of \$122,307 because Medicaid billing guidelines were misinterpreted by the provider and the billing errors were not detected by the State's automated Medicaid claims processing and payment system. The Comptroller found the following overpayments:

- \$111,416 because of billing for both BLS and ALS services each time ALS was provided.
- \$10,172 for billing BLS and ALS services for assisting another ambulance company. Prior to 9/1/02, the provider was entitled to reimbursement for assist services but after

that date the provider was not entitled to any reimbursement for these services since the local Social Services office had not established a rate for assist services.

- \$520 for billing both BLS and ALS services for monitoring a patient during transportation from one hospital to another.
- \$199 for billing multiple times for the same service.

The Comptroller's office recommended that the overpayments be recovered and controls be developed for preventing such overpayments in the future. The NYS Department of Health advises that as more ambulance agencies bill for service these audits will become more frequent. The Comptroller's office does not seem to care whether the service is volunteer, not-for-profit, commercial or municipal.

The audit summary is on the internet at <http://www.osc.state.ny.us/audits/allaudits/093006/06s30.pdf>

Federal Grant Recipients to be Available on Internet

President George W. Bush on Tuesday September 26, 2006 signed S2590, the Federal Funding Accountability and Transparency Act, which creates a Google-like search engine for federal spending. The bill tasks the Office of Management and Budget (OMB) with maintaining an Internet database containing information about an entity receiving federal funding, including:

- The entity's name
- The amount of any federal funds the entity has received in each of the past 10 fiscal years
- An itemized breakdown of each transaction, including funding agency, program source and a description of the purpose of each funding action

- The location of the entity and primary location of performance, including the city, state, Congressional district and country
 - A unique identifier for each such entity and parent entity
- Information concerning transactions involving individuals, federal employees or matters of national security would not be included. The new law forces OMB to post information from FY 1999 onward by the end of FY 2009.

New York State legislative grants appear in long lists that are not in alphabetical order. The list of fiscal year 2006-2007 Assembly grants is over 3,000 pages long. There is some talk of any effort to make access to the data more user friendly.

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EMS safety contributions for consideration by SEMAC. A website you might want to check out for additional safety ideas is www.emssafepatient.com which details an error reporting network called MEPARS.

16. The PIER Committee unveiled a new brochure they've developed for people on the move. The brochure, "Choosing a New Residence - Questions You Should Ask about EMS in Your New Community" should be available soon through the Bureau.
17. SEMSCO heard an appeal of an operating certificate denial by the Hudson Mohawk REMSCO (REMO) to NEALS (North East Advanced Life Support). An ALJ (Administrative Law Judge) concluded that there were conflicts of interest in the REMO process and NEALS had demonstrated need for their service in certain areas of Rensselaer County. The ALJ recommended SEMSCO reverse the REMO denial and issue an operating certificate to NEALS for certain areas of Rensselaer County. The SEMSCO systems committee recommended the appeal be remanded to REMO for consideration of issuance of an

operating certificate for parts of Rensselaer County pursuant to statutory definition of need and report back to the SEMSCO within 90 days. SEMSCO took the advice of the systems committee and did just that.

18. On the subject of appeals, Commissioner Novello upheld a decision of the New York City REMAC to allow FDNY to reduce medic staffing of their ALS First Response Units to a single paramedic.
19. The Paramedic Licensure TAG met to hear about Pennsylvania's system of permanent paramedic certification which took effect in 1994 following a 10 year effort. A survey of medics during Vital Signs 2006 in Syracuse returned 107 responses with 99 favoring licensure and 8 opposing. The TAG will meet again the Monday evening prior to the next SEMSCO meetings and plans to hear representatives from Detroit where medics are presently licensed. A draft report should be ready before summer 2007.
20. If you haven't seen or heard of the Berger Commission report, you should point your web browser to: www.nyhealthcorecommission.org and at least read through the

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Disciplinary Actions by NYS DOH now on Internet

As part of its work to enforce Public Health Law (PHL) Article 30 and Title 10 of the New York Code Rules and Regulations (Health), the Bureau of EMS brings actions against EMS agencies, individual providers, course sponsors and event sponsors found in violation of the code. These actions emanate from complaints filed with the Bureau by patients, other providers, EMS agencies and the general public. Complaints such as poor patient care, medication diversions, or any failure to comply with Part 800 or PHL Article 30 are subject to enforcement. Sanctions levied against individuals or agencies may result in

any number of penalties including civil penalties, suspensions or revocation of certification.

Previously, listings of actions were mailed to the 18 Regional EMS Councils around the state and it was hit or miss whether the information was passed on to agencies. At long last, the Department has posted its disciplinary actions on its web site. To access the information go to the Bureau of EMS home page at <http://www.health.state.ny.us/nysdoh/ems/main.htm>, scroll down to Policies, Laws and regulations and click on the last bullet in the list – EMS Disciplinary Actions.

Brigadier General F. David Sheppard Appointed Director of NYS Office of Homeland Security

Governor George E. Pataki on September 26, 2006 appointed Brigadier General F. David Sheppard as Director of the New York State Office of Homeland Security (OHS). Mr. Sheppard currently serves as Director of OHS' Weapons of Mass Destruction Task Force and is the Commander of the New York Army National Guard 53rd Troop Command located in Valhalla, Westchester County. As Director, Mr. Sheppard will receive an annual salary of \$158,000.

Mr. Sheppard will succeed James W. McMahon who is retiring from State service after a distinguished 40-year career. He returns to his law enforcement roots in his new position

as Chief of Staff of the International Association of Chiefs of Police.

As Director of the New York State Office of Homeland Security, General Sheppard will coordinate all State efforts to detect, identify, address, respond to and prevent terrorist acts from occurring within New York State. The Office of Homeland Security is the primary contact with the federal Department of Homeland Security and coordinates with cities and counties throughout New York to ensure maximum preparedness for a possible threats or terrorist acts.

Dr. Richard F. Daines Nominated to be NYSDOH Commissioner

Governor Eliot Spitzer announced on January 18, 2007 the nomination of Richard F. Daines, MD to serve as Commissioner of the Department of Health. Dr. Daines is President and Chief Executive Officer of St. Luke's-Roosevelt Hospital Center in New York City. Prior to becoming President, he served as Senior Vice President for Professional Affairs and as Medical Director. Dr. Daines served in a series of clinical and administrative positions at St. Barnabas Hospital in the Bronx, including Director of Critical Care, Director of Medical Education, Medical Director and Vice President for Professional Affairs, and Senior Vice President for Professional Af-


airs. He was also a founding member of the board of Partners in Health at St. Barnabas Hospital. He chaired the Health, Education and Human Services Task Force for Bronx Borough President Fernando Ferrer from 1998 to 1999 and served as Medical Director at Lincoln Medical and Mental Health Center. Dr. Daines received his B.A. from Utah State University, and his M.D. from Cornell University Medical College; he did his residency in Internal Medicine at New York Hospital.

Dr. Daines will earn a salary of \$136,000.

Senator Balboni Appointed to NYS Homeland Security Post

Michael L. Balboni has been named by Governor Eliot Spitzer to be his Deputy Secretary for Public Safety and Security. As such he will be the new administration's senior security and law enforcement official. An article in the NY Times quoted Balboni as saying "What we still lack is the White House talking to the firemen through the states; we don't have that type of coordination...Kotrino was a perfect example of that." However, an official at the NY Public Interest Group expressed that Balboni "has a blind spot when it comes to the tension between homeland security and the public's right to know, but he's smart and knows the issues." Balboni gave up a NYS Senate seat in western Nassau County he recently won re-election for.

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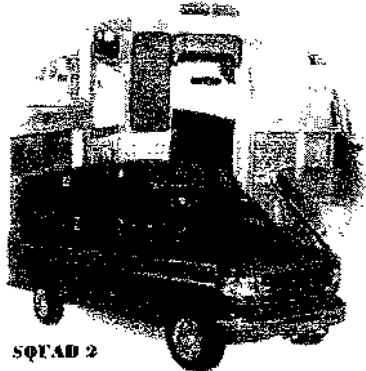
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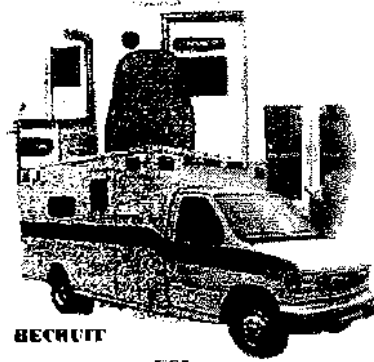
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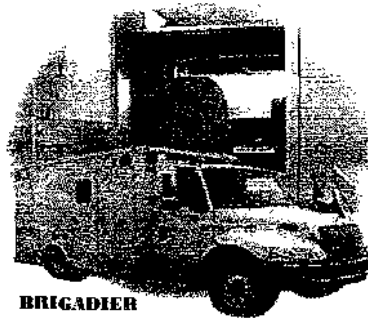


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Bits from Around the State and Beyond



District 1

ROCKLAND COUNTY LEGISLATURE PUBLIC SAFETY COMMITTEE is considering replacing a 32 year old helicopter with a new \$3.2 million unit. The present copter has been used for search and rescue and

lighting. The new unit would have a

winch to lower a basket or flotation device down by cable. So far, the committee has requested a list of all incidents the copter has been utilized in.

NYACK HOSPITAL, Rockland County, was suspended for a week in mid September as an On-Line Medical Control Facility. The action was taken by Hudson Valley REMSCO when it received information indicating the hospital did not have enough of its emergency room physicians credentialed as On-Line Medical Control Physicians resulting in inconsistent availability. Letters, e-mails and phone calls from REMSCO to the hospital apparently went unanswered. NYS DOH regulations require Medical Control Hospitals to have 80% of their emergency room physicians credentialed as On-Line Medical Control Physicians and to have a credentialed physician available at all times who can issue medical orders including prescribing medications or initiating certain procedures to EMS personnel in the field. Nyack attributed the oversight in maintaining enough credentialed staff to turnover and quickly moved to have additional physicians take the required on-line course. During the period of suspension, Good Samaritan Hospital in Suffern acted as Medical Control for EMS services that would normally have communicated with Nyack Hospital. The primary ALS unit affected by Nyack's suspension was Rockland Paramedic Service.

STONY POINT VAC, Rockland County, has received Town approval of a plan for obtaining a new headquarters. The owner of Don's Neighborhood Grill on Route 9W will sell his nearly 1 acre lot to the squad for \$1 million with \$300,000 as a down payment and the remaining \$700,000 to be financed at 7% over five years. The owner would continue to run the restaurant as a rent free tenant for the five years until the balance is paid and at that point the squad would demolish the building and build a new headquarters on the site. The old headquarters on Lee Avenue may be converted to affordable housing units for ambulance volunteers to attract members to stay in the community. The squad has been in service for 60 years and currently operates three ambulances handling a yearly call volume of about 1,500. The Stony Point EMS Tax District, which funds the ambulance service through a property tax, was activated in January 2004. Third party billing also brings in revenue to the District.

District 2

WESTCHESTER COUNTY'S fire/EMS trunked system is nearing operational status. The control channel is in service but there is no voice traffic yet. Word is that the two Motorola dealers (ESS and MetroCom) involved with the project have received

mobile radios and will start installing them shortly. Installation will be in alphabetical order of the departments starting with "A". The remaining five transmitter sites should be up and running by the end of the year. Once that is completed 1/4 mile grid testing will need to be done to verify signal strength within the coverage area.

ARDSLEY-SECOR VAC, Westchester County, demolished their old headquarters which was a small bank building in Mount Vernon before being trucked to Ardsley for its use by the squad. The new building is a prefab with meeting, storage and decon rooms and one ambulance bay. The squad's ambulance was kept in a chain link cage to protect it from vandals. A web forum posting indicates that Ardsley village offered the squad free space in a new firehouse but it was turned down.

District 5

MONROE VAC, Orange County, is involved in a BLS Glucometer Pilot Project approved by the Hudson Valley REMAC.

District 7

DEER PARK VFD, Suffolk County, had an ambulance involved in a collision on Tuesday morning October 17, 2006. The ambulance was responding on a call about 8:35 AM when it was hit by a suburban at an intersection. The ambulance then struck the front of a convenience store. The suburban collided head on with a third vehicle. The driver of the ambulance and an EMT were taken to a hospital for treatment of head injuries and the suburban driver was transported to the same hospital complaining of upper body injuries. An adult and two children in the vehicles were uninjured. Wheatley Heights responded to the original emergency call.

CENTERPORT VFD, Suffolk County, has received a one year extension to December 31, 2007 for compliance with the county's EMD dispatching requirements. Time and staffing issues were cited as reasons for being unable to certify all their dispatchers. They are actively pursuing full certification or sharing dispatch with other departments. They are compliant with the other aspects of the county protocol including crew confirmation, ALS and mutual aid times.

JAIL TRIPS PAY FOR SUFFOLK COUNTY VACS

Flanders-Northampton Volunteer Ambulance and South Country Volunteer Ambulance Company will be receiving \$300 per trip to cover the fuel, supplies and other expenses, including training incurred in transporting prisoners to hospitals. The bill to make those payments was sponsored by county legislators Jay Schneiderman (R-Montauk) and Kate Browning (WF-Shirley) and passed in December 2006.

Flanders-Northampton is called to the county jail in Riverhead and transports to Peconic Bay Medical Center in Riverhead. South Country serves the county jail in Yaphank and transports prisoners to Brookhaven Memorial Hospital. Prisoner calls number over 100 per year.

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Bits from Around the State (Continued from page 10)

As county facilities, the correctional facilities are tax-exempt property. Suffolk County Executive Steve Levy, in opposing the legislation authorizing the county to enter into contracts the provision of ambulance service to county correction facilities, said people who live in the communities that pay for the ambulance service should not have to cover what is, essentially, a county responsibility.

A factor that encouraged the Sheriff's office to come to an agreement was the fact that towns could redraw districts to leave correctional facilities uncovered. It was noted by the County Executive that correctional facilities present some unique problems including security, handcuffed prisoners, disease, escape attempts, this was a one time deal and it was not expected that there be a flood of bills coming forth for service to other government property such as buildings, parks and beaches.

ISLANDIA (VILLAGE OF), Suffolk County, is exploring its options for contracting for ambulance service which is currently provided by Central Islip-Hauppague VAC.

FARMINGVILLE VFD, Suffolk County, is facing protests from taxpayers over items in its proposed budget. Newsday reports residents packed a meeting of the volunteer fire department on Monday evening 10/9/06 to protest a \$2.9 million budget that raises fire taxes \$75. The budget includes \$260,000 for refurbished recreation rooms at two firehouses, \$55,000 for a racing vehicle for its Bandits Drill Team and a \$12,000 pay raise for a recently hired maintenance mechanic who is the son of a commissioner, stepson of another commissioner and godson of a third. Some residents questioned how a race car helps fight fires and how many more comforts of home can you have in a firehouse. One fire commissioner has already criticized the budget as excessive and lacking proper priorities. In the district's defense a Commissioner (father of the mechanic) said that renovating the recreation rooms will decrease emergency response times by keeping volunteer firefighters at the stations and the race vehicle is used in competitions with other fire departments and builds camaraderie. Farmingville operates 17 emergency vehicles including two BLS level ambulances on medium duty chassis from two stations.

FIRE ISLAND PINES, Suffolk County, voted to approve the creation of a Medical Tax District. This would allow the Town of Brookhaven to levy a medical tax to the property owners and for the community to either create or hire some type of EMS response agency. This may or may not include the neighboring community of Cherry Grove, although negotiations are still underway.

FISHERS ISLAND, Suffolk County, is a bit unique because of its location northeast of Long Island's north fork. The ZIP code is 06330 for a start! Though it's part of the Town of Southold, there's no way to directly get to the Long Island mainland and travelers must take a ferry from nearby New London, CT or an air taxi. Settled in 1644, there are no banks, no taxis, no cable

TV (residents have satellite TV), no fast food and virtually no crime. Year round population is less than 300 but increases over 10 times to over 3,000 in the summer. EMS ambulance service is provided by the Fishers Island VFD which operates at the AEMT-CC level. Patients are routinely transported by a boat aptly named *Sea Stretcher* to a hospital in New London for care. VFD staffing includes 34 firefighters and 8 EMS personnel.

GORDON HEIGHTS FIRE DISTRICT, Suffolk County, which operates two BLS level ambulances in addition to fire apparatus, will continue in existence after a petition drive to dissolve the district was rejected in late October by the Town of Brookhaven on technical grounds. The Deputy County Clerk stated that the petition was neither properly signed, acknowledged or authenticated – the signature sheets were not numbered, bound together as one volume and properly notarized as required by NYS election law. Unhappy residents have vowed to continue the fight while fire department officials have said they hope to find ways to lower district fire taxes which average \$1,344 a year supporting a \$1.48 million annual budget.

SELDEN FIRE DISTRICT, Suffolk County, is under scrutiny by Newsday and possibly the Suffolk District Attorney for how the district's annual \$200,000 travel and training budget (out of a \$3.9 million total budget) is overseen. Selden VFD operates a BLS level ambulance service. For attendance at conferences during a year Commissioners are allowed a \$1,700 advance for food and incidentals with airfare, hotel and conference fees paid for separately by the department. Newsday reports Commissioners have turned in handwritten notes on the backs of business cards and matchbook covers to justify \$100 dinners, \$45 lunches and \$20 breakfasts. One Commissioner submitted no receipts for \$1,045 in "miscellaneous" expenses during three out-of-state conferences over 19 days in 2005 but later said the \$1,045 was spent on tips. Some Commissioner expenses may have been reimbursed for alcohol which is a non-reimbursable travel expense for New York officials since a 1983 state Comptroller directive. Newsday reports a 1998 Comptroller's audit of Selden found excessive conference spending, failure to properly document expenses and months long delays in submitting receipts. New laws prompted by a Newsday series take effect in 2007 and require greater accountability from fire districts.

SUFFOLK COUNTY EMS DIRECTOR will be changing. Dr. Jeanne Alicandro resigned and left office October 20, 2006. The County Executive initially proposed the appointment of Dr. Melvin M. Fritz who is a doctor of Osteopathic Medicine with a practice in Huntington. Dr. Fritz has been active in numerous professional organizations, is Board Certified for the American Board of Family Practice, has served as a Surgeon for the Suffolk County Police Department and Suffolk County Deputy Medical Examiner, is a member of the Suffolk County Board of Health since 1980 and is Secretary of the Suffolk County Water Authority. Suffolk REMAC met with the doctor discussing many issues regarding the EMS system and subsequently voted to oppose his hiring as he has had many years of family practice experience but none in

(Continued on page 14)

Stroke Centers Establishing Hub and Spoke Setup

In some parts of the state there are serious issues with resource availability when volunteer ambulances are expected to transport patients to one of the 91 designated stroke centers scattered unevenly across the state. Calls can approach three hours from start to finish.

Hospitals that cannot meet the standards required to be designated a stroke center are now being given the option of joining with another hospital that has the designation. In one of the first setups, Community Memorial Hospital in Hamilton,

Madison County is partnering with Mary Imogene Bassett Hospital, an 180-bed acute care, inpatient teaching facility in Cooperstown, Otsego County. Patients will be interviewed by a telemedicine hookup and after reviewing assessment results the consulting physician will give the decision whether or not to administer the thrombolytics.

Interested stakeholders have been impressed with how the NYS DOH reacted relatively quickly to concerns and addressed them.

Hospitals Must Provide Translation Services for Patients

As of September 13, 2006 the New York State Department of Health (NYS DOH) requires all hospitals to:

- Provide skilled translators
- Meet time limits - generally 10 to 20 minutes - for how long it will take to provide an interpreter after a patient request
- Test the skill level of interpreters [Note: There are no state or federal standards for what qualifies as a "skilled" medical interpreter]
- Appoint language coordinators
- Identify a patient's primary language on medical records

In 2005, immigrant-rights groups filed complaints against several New York hospitals including St. Vincent's Hospital on Staten Island and the three-hospital MediSys Health Network (Brookdale, Flushing and Jamaica) saying that communication barriers were harming non-English speaking patients. It was alleged that the reliance on friends and family to translate for

patients - a common practice in exam rooms - can interfere with medical care. A well-intentioned niece may hesitate to share upsetting news, or a patient might not disclose symptoms for fear of alarming their child. In other cases, information may just get garbled, impeding the ability for information to flow freely and violating patient confidentiality laws.

The Greater New York Hospital Association (GNYHA) said it participated in discussions that led to the new regulations and is confident its members will be able to meet the standards. Most hospitals are expected to rely on volunteers, bilingual staff and telephone translation agencies. Patients could choose to use friends or relatives as interpreters, but only after they refused translators provided by the hospital. Children under 16 may not be used, except in emergencies.

Regulations will be enforced through the regular on-site visits by the NYS DOH and by investigating patient complaints to the department's hot line.

National Registry Switching to Online Final Exam

On January 1, 2007 the National Registry of EMT's pencil and paper final exams was replaced with computer based testing (CBT). All students will take their EMS cognitive exam on a computer. Students will complete their NREMT application and pay their application fee via the NREMT website.

Implementation of computer based testing strengthens NREMT's commitment to serving the EMS community and providing a valid and reliable exam process. It also provides numerous benefits to the candidates, educators, and others in the EMS community as well as the American public, including: rapid turnaround of test results, choices on when and where to take the exam, easier registration, more fair and accurate evaluation of a candidate's competency, and fortified exam security.

The actual test application process is handled by a company called Pearson VUE, a provider of innovative electronic testing solutions that enhance the performance, reliability and security of high-stakes testing programs throughout the world.

Training Centers have been advised that their students will not be able to take an NREMT exam until their training program is registered and approved. Program Directors must log on to www.nremt.org and establish an account and register the program. Individual instructors are encouraged to contact their Program Director and confirm that their training center or program has been registered. If assistance is needed the

NYS Tax Change for 2007

The NYS Department of Taxation and Finance has announced a new refundable credit is available to volunteer firefighters and ambulance workers. If you serve as a volunteer firefighter or ambulance worker for the entire tax year, you may be allowed a credit of \$200. However, taxpayers claiming a real property tax exemption for such service are ineligible for this credit. Look for more information on this with your 2007 tax package.

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Air Ambulance Accidents Rise

A report in USA Today confirmed what many people have already noticed – there are more and more news stories about crashes of helicopter and fixed wing air ambulances. Sixty people have died in 84 crashes since 2000 with over 10% of the helicopter fleet involved in the crashes. The report indicated 2/3 of the fatal crashes occurred in poor visibility and “pilot error” is cited as a contributing cause in most instances.

The article referred to a 2002 study in the Journal of Trauma that indicated helicopters were used excessively for patients who weren't severely injured. A recent cable TV show indicated that in at least one major jurisdiction a trauma patient who was not fully oriented (A&O x3) was justification for Medivac. A summer 2006 SUV accident in Yaphank, Suffolk County saw 2 of 18 patients airlifted from the scene but a news article

indicated “several with possible broken bones, but none critically hurt...”

The Wall Street Journal weighed in with the comment that “air-evacuations end up saving relatively few lives, while costing as much as 10 times more than ground ambulances.” At least one commercial web site indicated the costs vary and can be \$800.00 an hour.

While air ambulances have undoubtedly saved lives, there may be more guidance coming forth from the Federal Aviation Administration on when and when not air ambulances should be flying. These recommendations may include: standardized use of night-vision goggles, installation of ground-collision warning devices, more-stringent regulations regarding limited-visibility operations, flight-data recorders and cockpit voice recorders, and cockpit-video recorders

Medivac Experience in Midstate REMSCO Region

Midstate Regional EMS Council covers Herkimer, Madison Oneida Counties. From November 10, 2004 through November 10, 2005 Mercy Flight Central, based in Marcelus, NY, recorded 40 requests for medical helicopter response to a scene. There were 19 actual patient transports with 9 responses cancelled enroute, 6 weather cancellations and 6 cancellations prior to take off. 15 patients were transported from Madison County and 4 from Oneida County. All patients went to SUNY Upstate University Hospital in Syracuse. 11 patients were classified as critical care level and included 7 intubations most of the rapid sequence type. 79% were admitted for at least one night

stay while 21% were discharged from the Emergency Department. 18 were trauma and one was medical. 14 were adults and 5 were pediatric.

- Launch time averaged 7.3 minutes.
- Flight time to scene averaged 21.4 minutes. • Patient contact time at scene averaged 13.2 minutes. In 79% of the calls, extrication was still in progress or there was some other situation when the helicopter arrived on scene and patient turnover to the air medical crew was delayed. Actual ground time averaged around an hour and in some cases was up to an hour and 40 minutes.
- Flight time to the hospital was 15.4 minutes.

EMT Freezes to Death Due to Lack of Cell Phone Signal on I-87

Shortly after 1 AM on Thursday January 25, 2007 Alfred Langner, a 63 year old EMT with 30 years service with Hat-zolah Volunteer Ambulance in Braaklyn, and his wife were southbound on I-87 in North Hudson, Essex County when their car went off the roadway near mile marker 105, became airborne and landed behind a large rock. Cell phone coverage is non-existent along a 70 mile stretch of I-87, the Northway, which runs from Albany north to the Canadian border and the accident was not discovered by NY State Police till 32 hours later - shortly before 10 AM on Friday. Langner lived for about 13 hours till succumbing to his injuries and overnight temperatures that dipped to -7F. Langner's 58 year old wife, wearing ear muffs and a down coat, survived with frostbitten feet and a back injury. After stabilization at the scene by

Schroon Lake Ambulance and Elizabethtown-Lewis Ambulance she was taken by Schroon Lake to Elizabethtown Community Hospital before being transferred to Fletcher Allen Health Care in Burlington, VT. A news quote from one EMS responder was that “The first three letters of the vehicle's license plate were EMT, so it really hits home.”

Although the Adirondack Park Authority has agreed to the installation of 33 towers each about 38', cell companies say they are too small, would not extend coverage to communities on either side of I-87 and would be unprofitable. NYS meanwhile is working on a plan to build three 100' towers south of the Canadian border with repeater towers between exits 28 at Schroon Lake and 34 at Keeseville.

Adirondack Park Agency Agrees to Radio Towers

Saratoga County EMS advises that an eight year struggle concluded November 9, 2006 when the Adirondack Park Agency (APA) approved a revised Saratoga County design for an Emergency Services Radio System that will locate 5 radio towers within the Adirondack Park. The towers within the park include Lake Luzerne in Warren County, Corinth High School, the Conklingville Dam, North Shore Road in Edinburg

and Lakeview in Doy. In addition to current towers in Ballston Spa, Spruce Mountain, Halfmoon and Providence, radio sites will also be added at Jonsson Tower on the Skidmore College Campus or the nearby Wesley Health Care Center in Saratoga Springs. The County will need to complete permitting with the FCC and plans to bid the system in Spring 2007 with construction to begin during the summer.



Bits from Around the State (Continued from page 11)

emergency medicine. It is understood that other candidates are being considered by the County Executive.

SUFFOLK COUNTY POLICE DEPARTMENT's Marine Bureau has been upgraded to ALS level as they have been supplied with monitor-defibrillators, intubation equipment and other supplies by the EMS Division of the county's Department of Fire, Rescue & Emergency Services.

SUFFOLK REMAC approved AutoPulse pilots by the FARMINGDALE FIRE DEPARTMENT and SELDEN FIRE DISTRICT. Although several studies have reported conflicting results vs. manual CPR, it has been noted that the 2005 AHA Guidelines advise "push harder, push faster" which is compatible with the device's operations.

RESUSCITATION EXCELLENCE PROGRAM PROPOSED FOR SUFFOLK COUNTY – Suffolk REMAC has developed a plan to take the new Emergency Cardiac Care Resuscitation Guidelines and put them into a three hour program that focuses on excellence in resuscitation. Two or three pilot presentations, conducted by a core faculty, will be going out to test the program and see if the desired objectives are met. The tentative plan is to conduct the pilot presentation at Port Jefferson VAC. This is a "train the trainer" program and the objective to recruit about three persons from each corps to serve as faculty for the respective corps and then train a critical mass of all providers in Suffolk County. It will be done using very high end computerized manikins for qualitative measurements of resuscitation consisting of time, compression and ventilation measurements with a lot of repetitive practice.

District 10

LOCKPORT, Niagara County, may shift ambulance service from its municipal fire department to a commercial service. Lockport's mayor indicated he is looking for ways to reduce 2007 expenditures especially in departments that spend the most such as public safety. It has been claimed that the fire department's two ALS ambulances bring in \$600,000 a year but the mayor doesn't think a cost analysis has ever been done to see what actual costs are. EMT certification is a requirement to becoming a Lockport firefighter and ambulance runs constitute the vast majority of calls. The mayor wants an assessment done this year indicating "The Council is committed, and I am committed, to lowering taxes. The only way to do it is by decreasing services."

MIDSTATE REGIONAL EMS COUNCIL has lost one of its founders. On October 23, 2006 Deb Hart passed away in Texas after a long illness. Along with being the Oneida County EMS Coordinator and REMSCO Chair for many years Deb was instrumental in bringing about the formation of the Midstate Region. There was a memorial service at Central Oneida County Ambulance on November 18th.

CORNING, Steuben County, is hiring a consultant for \$20,000 to determine if the city could provide municipal ambulance service through its fire department for less than the \$43,000 annual fee

that it pays commercial provider Rural/Metro. Corning FD currently is a non-transporting BLS First Responder service while Rural/Metro provides ALS level ambulance service. Corning's new mayor cited that Rural/Metro pays other municipalities for the right to provide service and indicated that Buffalo receives more than \$400,000 annually from the company. Rural/Metro has had contracts with the city for 40 years and handles more than 2,000 calls in the city each year with about 1,200 of the total being emergencies. The current contract runs through the end of 2007.

BUFFALO GENERAL HOSPITAL, Erie County, has received NYS DOH approval to build a \$2 million helipad atop the hospital's "A" building at High and Ellicott Streets. Construction is expected to take about a year. Currently Erie County Medical Center receives medivacs for both institutions with Buffalo General patients being transferred by ground ambulance. Buffalo General expects about 150 patients a year to arrive by helicopter.

NORTH SENECA AMBULANCE, Seneca County, was involved in a parking lot accident following a parade. The accident occurred in Phelps VFD's parking lot after the town's 40th annual "Kraut in America" Souerkrout Festival parade on Saturday August 5, 2006. The driver's foot slipped from the brake to the gas pedal and the ambulance struck a parked Ontario County PD car which in turn struck a parked NYS Police car. A pedestrian complained of arm pain but RMA'd.

GREATER AMSTERDAM VAC, Montgomery County, will be expanding in April with the merger of ST. JOHNSVILLE VAC. Both are ALS level providers. The squad will be the largest in the Adirondack-Appalachian REMSCO area responding to approximately 8,000 calls a year spread out over a response territory of over 450 square miles. GAVAC will utilize 9 modern ALS ambulance and 3 fly vehicles to provide service to the citizens of Montgomery County as well as to response areas of Fulton County and routine mutual aid response to Saratoga, Schenectady, and Herkimer Counties.

District 12

MINEOLA VAC, Nassau County, received a NYS grant of \$18,000 towards the purchase of lifesaving equipment. The grant was secured by then State Senator Michael Balbani.

NASSAU REGIONAL EMS COUNCIL news includes a successful Annual Awards Dinner on October 26, 2006 at the Coral House in Baldwin with over 336 in attendance. Burn Kits supplied by the state are being distributed. NYS Senator Michael Balbani, 7th SD has indicated he will try to secure a \$50,000 state grant to support Nassau REMSCO operations. QA/QI Committee is working on response time compilations as a deliverable to NYS DOH. In cases where an AED has been used there is a hospital discharge alive rate of 27%. REMAC has proposed that all ambulances in the county carry Pulse Oximeters and AEDs by January 1, 2008 and the use of Quick Clot has been OK'd. In a major announcement, Dr. Bernard Beckerman has been named the first EMS Coordinator/Medical Coordinator.

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Bits from Around the State (Continued from page 14)

LAWRENCE-CEDARHURST VFD, Nassau County, was assessed a civil penalty of \$2,000 by the NYS DOH for violation of Public Health Law Article 30, Section 3005(1). The section deals with the need for ambulance and ALS First Responder operating certificates.

NORTH SHORE-LIJ HEALTH SYSTEMS' EMERGENCY PREPAREDNESS CENTER (EPC) in Syosset, Nassau County was featured in an article in a recent issue of *Homeland Protection Professional*. The 52,000 square foot operations and administration facility serves all 15 of the organizations hospitals located in NYC and Long Island. ID cards control access to the camera covered building which has back-up power, back-up Internet, three separate telephone providers and access to the health system's intranet. The EPC occupies 3,000 square feet and includes the EMS communications center which dispatches for the intra-facility ambulance fleet. Adjoining the center is a 40 x 40 foot space that can be activated at a moments notice as an Emergency Operations Center (EOC) – there are vests already on the chairs. Should there be a crisis, representatives would be sent to each of the 15 hospitals and the Nassau County Office of Emergency Management's EOC to provide situational awareness reports back to the EOC. Representation of the NYC OEM's EOC would be provided through the Greater NY Hospital Association. Why this level of preparedness? NS-LIJ employs 40,000 people including 10,000 nurses and 7,000 physicians, has 4,840 beds in service and operates a large fleet of ambulances providing 911 system service in parts of NYC as well as a large transport service. A system that size has both a large risk factor but could also contribute substantial resources if Long Island were to be impacted by major weather system such as a hurricane or there was a major disease outbreak.

District 20

HAMILTON COUNTY has appointed Gordon L. "Don" Purdy as the first Director of its Emergency Management Department. The decision to upgrade the head of the Department from the title of Manager to Director was made due to the increased demands from New York State and the federal government for counties to prepare for and respond to natural and manmade incidents. The Director will work 21 to 35 hours a week at an hourly pay rate of \$16.43 an hour. Part time fire and EMS coordinators will also be appointed. Purdy is a resident of the Lake Pleasant/Speculator area and previously served as Director at CAMP-of-the-Woods. His wife is a volunteer EMT with Speculator VAC.

ESSEX COUNTY ambulance squads supplemented by squads from CLINTON COUNTY responded to a serious bus accident August 28, 2006 on I-87 at mile marker 115 in the Elizabethtown Fire District. 19 ambulance services were involved in the operation. Two helicopters were called but could not reach the accident scene. There were 5 fatalities and 43 patients transported to hospitals in Glens Falls, Ticonderoga, Elizabethtown and Champlain Valley Physicians Hospital (CVPH) in Plattsburg with further transfers to Fletcher Allen in Vermont and Montreal General in

Canada. The SMART triage protocol was implemented with all patients sorted within ten minutes. A lesson reinforced is that it's hard to not automatically start treating but it's vital that triage is done first.

GUILFOYLE AMBULANCE SERVICE, INC., an ALS level commercial service headquartered in Watertown, Jefferson County, was assessed by the NYS DOH on January 9, 2007 a civil penalty of \$6,000 for violation(s) of 10 NYCRR Part 800.21(h) which requires an ambulance service to "have an each call at least one attendant who is a certified emergency medical technician in attendance with the patient at all times except for transfers between hospitals. Another licensed health care provider specifically authorized in writing by a physician may serve as the patient care attendant on transfers between hospitals. The ambulance service shall maintain the physician's order for three years. A licensed driver shall drive the ambulance".

INLET VOLUNTEER AMBULANCE SQUAD, Hamilton County, had an ambulance carrying a newborn baby involved in a collision on Wednesday morning 1/3/07. The run started with a 911 call at 6:15 AM, the birth of a baby boy (complicated with the umbilical cord wrapped around his neck) in the ambulance at 7:33 AM on Route 28 near White Lake, and then a collision with a minivan at about 8:00 AM on French Road in New Hartford while approaching the Faxton-St. Luke's Healthcare facility. Baby and mother were uninjured although the dad and the two paramedics on board suffered minor injuries. News reports did not say anything about any injuries to the two drivers.

District 30

SHANDAKEN AMBULANCE SQUAD in Phoenicia, Ulster County, is paying \$1,200 a day to have a paramedic stationed in the town after the squad's chief and full time paramedic level provider resigned as did the squad billing manager who was also a paramedic. Local news media report that in early January the Town Board stripped the squad's longstanding chief of his title, reduced his pay, hired his predecessor as the new administrator for \$15,000 a year as well as a longstanding squad member and former town councilman as operations manager at \$5,000 a year. Media indicate the changes lead back to the former squad leader's questioning of the town's costs keeping an ambulance on call at state-owned Belleayre Mountain Ski Center on winter weekends allegedly resulting in a diminished service for the remainder of the town. To continue ALS level service the town hired certified paramedics, through Mobile Life Support Services of Kingston, to work around the clock for Shandaken until a member or members of the squad can get the appropriate credentials which the new administrator expects to happen shortly. The Mobile Life paramedics are staying at the Emerson Lodge in Mount Tremper at no cost to town taxpayers as the facility had a room available and gladly donated it at no cost to the town or the ambulance company. The town hopes to defray the paramedic's cost by retaining the revenues from any calls to which the para-

(Continued on page 16)

Best Practices – Exchange Ambulance of the Islips

The May/June 2006 issue of Emergency Medical Products News included a full page article on Exchange Ambulance of the Islips' Special Operations truck.

The squad originally stocked a small trailer with supplies that would be needed at an MCI or during standby at a large event. However, weight considerations, the time needed to hook up a trailer plus the unfamiliarity of most people with towing a trailer prompted the squad to look at other alternatives.

Instead of going for a purpose built rescue truck as used by fire departments, the squad acquired a contractor's box type truck mounted on a E-450 dual rear wheel chassis from the local Ford dealer. Although a bit higher, the overall dimensions and cab layout make it look and feel like driving a Type III ambulance. With outside compartments on each side already built into the truck body, modifications included installation of emergency lights and siren and a diesel generator connected to the vehicle's 55 gallon fuel tank. Total cost was

\$53,000.

Outside compartments are stocked with ALS and BLS equipment and supplies. Inside, shelves are stacked with backboards, folding cots and large plastic bins containing chemical protective suits, decontamination supplies plus more medical supplies.

Carried on the vehicle is an inflatable tent that can be set up for either incident command or a 4 bed aid station. A small inflator pump powered by the generator inflates the tent in 10 minutes.

Exchange Ambulance's annual call volume is 2,600 including rehab for four fire departments plus numerous special events including outdoor concerts and sporting events drawing up to 30,000 people. The squad's 85 volunteers are prepared to handle whatever comes at them. For more information about the squad and its equipment go to the web site at www.islipexchange.com

District 15 Added to Association

A new district was added to the Association when a group of large "hybrid" EMS agencies decided to join. The agencies have both volunteer and paid providers and run an average of 4,000 calls a year with at least one handling in excess of 7,000 calls. Initial membership in the district includes:

- Gotes Volunteer Ambulance Service, Rochester, Monroe County
- Greater Amsterdam Volunteer Ambulance Corps, Amsterdam, Montgomery County
- Henrietta Volunteer Ambulance Service, Rochester, Monroe County
- Lancaster Volunteer Ambulance Corps, Lancaster, Erie County
- North Area Volunteer Ambulance Corps, North Syracuse,

Onondaga County

- Union Volunteer Emergency Squad, Endwell, Broome Count.
- Rondy Campbell of Gates VAS is Chairperson of the District and John Hussar of Union VES joined the NYSVA&RA Board as a Director. Major issues of concern to the group include:
- Workers compensation coverage of volunteers and employees. Squads have to pay one policy based on the number of ambulances and another policy based on the number of employees but could be hit with a double premium increase if there is an ambulance accident involving the paid staff.
 - State and federal fuel surcharges and the unwillingness of some towns to allow squads to purchase fuel at town owned pumps.

More Bits Continued from page 15

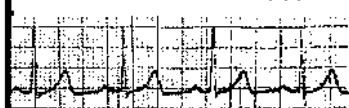
medic responds. While the media reported the former chief stayed with the squad for a short period until advanced life support was transferred there was also mention about a threat, which was denied, to send state troopers to get narcotics.

CONNECTICUT – GREENWICH HOSPITAL in Connecticut has been approved by Westchester REMSCO as a "Special Resource Hospital" allowing Westchester ALS and BLS services to contact the hospital for On-line Medical Control if transporting a patient to that location rather than going through an in-county medical control facility. As reported in our last issue, Greenwich Hospital has been seeing more ambulances coming from Westchester since the closing of United Hospital in Port Chester, NY in February 2005. ER staffing rose from 55 to 69 to handle in-

creased visits which went from 31,000 in 2004 to 37,000 in 2005.

NEW JERSEY – ATLANTIC HEALTH SYSTEM's Air One helicopter based in Morristown, NJ has indicated an interest in providing emergent transports and inter-facility critical care transfers to areas of New York State. Air One, a Eurocopter 135 operated by PHI, was unveiled March 1 at Morristown Memorial Hospital, a regional trauma center and part of Atlantic Health's system. Flight times from its base are 12 to 15 minutes to Port Jervis, 15 to 18 minutes to Goshen, Middletown and New City and 18 to 21 minutes to Monticello and Peekskill. Eight paramedics and seven nurses currently serve as medical crew and when not needed for calls are rotated through the critical care units at Morristown memorial to continually sharpen their skills.

PULSE CHECK 2007



The 52nd Anniversary Educational
Conference & Trade Show
October 4-6 at Hudson Valley Resort & Spa

For more information
on Pulse Check 2007
go to NYSVARA.org

Federal Government Centralizing Excess Equipment Sales

Page 17

Officials with the General Services Administration's Federal Asset Sales e-government initiative launched a central Internet portal on Oct. 1 for selling excess government property, in an attempt to consolidate agency sale centers. Four agency-run sales operations act as centers for disposing of civilian agencies' personal property. The centers are GSA Auctions, the Treasury Department's Forfeiture Fund, the U.S. Marshals Service Asset Forfeiture Program and the Agriculture Department's Centralized Excess Property Operation. Sales of real property, such as land or buildings, are already

largely centralized around three agencies - GSA and the departments of Agriculture and Housing and Urban Development - and their property sales offerings will be included on the Federal Asset Sales Web portal. The Web site is intended to act as a way to advertise the items for sale, but the actual transactions will take place within the sale centers. The time-line for migrating to the centralized sale centers has not been established, but GSA officials anticipate agencies will make the switch within the next year or sooner.

Wheeled Coach's Parent Corporation Sold to New Owners

Reuters news agency reported on September 26, 2006 that Collins Industries Inc. (CNSI.PK: Quote, Profile, Research), a manufacturer of ambulances, the Wheeled Coach brand, and small school buses agreed to be acquired by two private firms for about \$110 million including assumed debt. The acquirers are Steel Partners II LP, a private investment partnership based in New York, and American Industrial Partners, a private equity firm. The

terms valued Collins shares at \$12.50, a 31.6% premium over their 9/26 closing price. Collins said the purchase price is 68.9% above where the shares traded in June before the Hutchinson, Kansas-based company said it was exploring a possible sale. Collins employs about 1,000 people in six plants. The transaction is, pending shareholder and regulatory approval.

Free PDA Hazmat Data for First Responders

When first responders arrive at a hazmat (hazardous materials) incident, they need to know exactly how hazardous a material or substance may be and what problems may develop as a result. The U.S. National Library of Medicine (NLM) has released a Personal Digital Assistant (PDA) software tool designed to help first responders gather that kind of information when they arrive at a hazmat incident such as a chemical spill.

The software tool, WISER (Wireless Information System for Emergency Responders) provides the emergency responder with critical information on hazardous substances such as the physical characteristics, human health data, and containment and suppression information for that substance. WISER was customized for easy navigation and quick access to critical information required by first responders.

To assist decision making, the user may specify the role they are currently performing at the scene of the incident. WISER then organizes the information in a sequence most relevant to that role - first responder, hazmat specialist or emergency medical specialist (EMS). WISER can also help identify unknown substances. Using input about observed physical properties of the unknown substance, along with reported symptoms and observable signs among victims, WISER can assist the user by narrowing the range of substances that may be involved in a specific incident. As the emergency responder selects observed properties and symptoms, WISER looks in its database for chemical substances that have these characteristics. As the user provides additional information, the list of suggested chemicals decreases. WISER presents the user with a list of candidate chemicals at any point in the identification process.

What do you need to run WISER? One of the following is needed: Pocket PC 2002 or Pocket PC2003 device with 15 megabytes of memory or Palm OS® PDA with version 3.5 or above and with 7.5 megabytes of memory, or Microsoft® based personal computer with a minimum of 17 megabytes of hard disk space and Microsoft® .NET framework. (If you do not have .NET framework, the installer will assist in downloading and installing it.)

A number of organizations, for example, Baltimore County (Maryland) Hazmat Team training program, the Illinois Fire Service Institute, and the Federal Emergency Management Agency's (FEMA) Chemical Stockpile Emergency Preparedness Program, have added WISER to their training curricula.

A free copy of WISER for PDAs or Windows desktop, it can be downloaded from <http://wiser.nlm.nih.gov>. In addition, a Web-based version was also developed. By joining an automatic mailing list, users will be notified of important updates, some of which may be critical for the safe use of the information. (Joining the mailing list is optional.)

Matt Camire
Territory Manager



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NYSVA&RA Pulse Check 2006

NYSVA&RA OFFICERS FOR 2006-2007

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<i>Executive Vice President:</i>	Roy Sweet, District 19
<i>Vice President:</i>	Henry A. Ehrhardt, District 4
<i>Treasurer:</i>	Tim Ryan, District 12
<i>Financial Secretary:</i>	Rolph Cefalo, District 18
<i>Secretary:</i>	Mandy Squillini, District 1

NYSVA&RA 2006 AWARDS

Presidential Award:

James B. Downey, District 4, Jamaica Estates-Holliswood-South Bayside VAC

EMS Person of the Year:

Ryon Gunning, District 4, Glendale VAC

Leadership:

Ted Rabinowitz, District 4, Glen Oaks VAC

Educator of the Year:

Robert Smath, District 4, Glen Oaks VAC & West Queens EMT Institute

Rescue-EMS Achievement:

Steve Kay, District 1, Spring Hill Community VAC

Unit Citation:

Harrison VAC, District 2

Civilian Award:

Josh Weinstein for the life saving ice rescue of his father Paul Weinstein from Raquette Lake, Hamilton County

EMS Award:

Roy Sweet, Broadalbin VAC for invaluable assistance during the ice rescue of Paul Weinstein from Raquette Lake

NEW YORK STATE 2006 CHAMPIONSHIP EMT, CFR & AMBULANCE CHALLENGE DRILL RESULTS

Problem #1

1 st place:	Exchange Immobilizers
2 nd place tie:	Manorville Bod Squad
2 nd place tie:	Cl-Happauge Code Blue

Problem #2

1 st place:	Exchange Immobilizers
2 nd place tie:	Cl-Happauge Code Blue
2 nd place tie:	Manorville Bod Squad

Overall

1 st place:	Exchange Immobilizers
2 nd place tie:	Cl-Happauge Code Blue
2 nd place tie:	Manorville Bod Squad

Adult:

Problem #1

1 st place:	Whitestone Millennium Unknowns
2 nd place:	Glendale Trauma Tuesday

Problem #2

1 st place:	Whitestone Millennium Unknowns
2 nd place:	Glendale Trauma Tuesday

Overall

1 st place:	Whitestone Millennium Unknowns
2 nd place:	Glendale Trauma Tuesday

Ambulance Drill

1 st place:	Glendale VAC Trauma Buffs
2 nd place:	Whitestone VAC Millennium Unknowns
3 rd place:	Huntington Community FAS Advisors
Novice trophy for 1 st time competitors	
CFR Drill: Huntington Community FAS Funny Bones	
Ambulance Drill: Mastic Beach VAC	

WE REMEMBER AND HONOR OUR DECEASED

A Memorial Service was held at the Association's Pulse Check Conference on August 26 at the Hudson Valley Resort. The following deceased members were honored and remembered:

District Four:

Lt. Joseph Michael Pelo West Hamilton Beach VFD & VAC
Eileen Petrowski Glen Oaks VAC & Queens Village-Hollis-Bellerose VAC

Patricia Waters Schwartz Peninsula VAC

Rev. Donald Ventura Rock VAC

William White Jamaica Estates-Holliswood-South Bayside VAC

District Five:

Poul Doughty Town of Newburgh VAC
Beverly Beach Florida Fire & Rescue Squad

District Six:

Harold W. Lindsey Mamakating First Aid Squad and NYSVA&RA Post President

District Seven:

Sara Sartory South County VAC
Joseph D'Andrea, Jr. Huntington Comm. F.A.Squad
Ronald Hunter Wyandanch-Wheatley Hts. VAC

District Eighteen:

Rosa T. Belmont Whitestone Community VAS
Lawrence R. Eivers Whitestone Community VAS
John M. Gleason Whitestone Community VAS
Jean Gourley Flushing Community VAC and NYSVA&RA Treasurer

Melvin Harris Whitestone Community VAS
Peggy McCarthy Whitestone Community VAS
Dominic J. Rizzi Whitestone Community VAS
Arlene Rajas Whitestone Community VAS
Marion Sachs Whitestone Community VAS
Carl Sperazza Whitestone Community VAS

District Nineteen:

Paul Krutz Mid County VAC
Kenneth Plummer Clifton Park-Halfmoon VAC
Art Simpson Mid County VAC

...and all volunteer ambulance personnel, firefighters and emergency service men and women who answered their final alarm since our last Memorial Service, plus our military personnel who have given their all overseas in the pursuit of freedom.



US Department of Labor Guidance on Volunteer vs. Employee

An August 7, 2006 letter from the US Department of Labor to the International Association of Fire Chiefs supplemented prior guidance issued by the Department and provided more clarification to the issue of volunteers receiving payments and/or benefits. The issue is important as volunteer emergency service organizations are looking for ways to attract and retain volunteers. It has been cited that almost 30% of all volunteer firefighters are paid a small fee for each call to which they respond.

Generally, a person is considered a volunteer when the individual:

- (1) Performs hours of service for a public agency for civic, charitable or humanitarian reasons, without promise, expectation or receipt of compensation for services rendered.
- (2) Offers services freely and without pressure or coercion, direct or implied, from an employer and
- (3) Is not otherwise employed by the same public agency to perform the same type of services as those for which the individual volunteers.

Although a volunteer can receive no compensation, a volunteer can be paid expenses, reasonable benefits and/or a nominal fee to perform services. Examples of permissible expenses or benefits include dry cleaning, uniform allowance, out-of-pocket costs of transportation, supplies, equipment, payments for a group insurance plan, etc. Economic realities are considered in the determination of whether or not payments for service are nominal and include:

- (1) distance traveled and time and effort required of a volunteer.
- (2) availability – limited or unlimited – of a volunteer to provide services and
- (3) basis – as needed or throughout the year – on which a volunteer performs services.

The Department will presume the fee paid to a volunteer is nominal as long as it does not exceed 20% of what the public agency would otherwise pay to hire a full time employee. Absent other considerations the Department would consider

the following as nominal payments:

- (1) \$1,200 per year regardless of the number of shifts or amount of time spent responding to calls – on average a minimum of 24 shifts and/or 60 hours on calls.
- (2) \$100 per month regardless of the number of shifts or amount of time spent responding to calls on average a minimum of 4 shifts and/or 8 hours responding to calls.
- (3) \$100 per month so long as the volunteer staffs a minimum of 2 shifts and/or spends a minimum of 5 hours responding to calls during the month. Additional payments of \$25 made for each additional shift over 4 during the month and/or for every 2.5 hours spent responding to calls exceeding 12 hours during the month.
- (4) \$25 (or \$30 or \$40) for each four hour block of time regardless of the actual amount of time below four hours spent at the station of responding to calls.
- (5) \$25 if the volunteer staffs a shift of at least 8 hours and/or spends 2.5 hours responding to calls with an additional \$15 per shift if the shift exceeds 8 hours or responds to calls over 5 hours during a single shift.
- (6) The volunteer is provided with \$1500 personal property tax relief annually during the term of the volunteer service.

The letter goes on to discuss considerations of a paid employee of one public agency being a "bono fide" volunteer with another related public agency such as a Public Works employee being released during the work shift to respond as a volunteer with the Fire and Rescue Department.

Previous guidance on being a paid employee during the day and a volunteer with the same organization on evenings and/or weekends remains in effect – it can't be done. However, working for a private EMS service contracted to cover day shifts and then volunteering with a VAC or VFD that contracted the private service appears to be OK.

As in all situations when dealing with the application and interpretation of laws and regulations, organizations should seek out competent legal advice.

Disaster Medical Assistance Team NY-4 Accepting Applications

DMAT-NY-4 is one of three FEMA teams in the New York area along with NY-2 of Westchester and Task Force 1 – Urban Search and Rescue of NYC. DMAT-NY4 is based in Rockland County Fire Training Academy in Pomona and is currently accepting applications for the following positions. EMT's and Paramedics - MUST HAVE CURRENT CDL LICENSE (5 openings); Doctors - unlimited openings; Physician Assistants - unlimited openings; Nurses LPN and RN, and NP - unlimited openings; Pharmacists or Registered Pharmacy Tech-

nicians - - unlimited openings

Please note that there is mandatory pre-deployment online training. You must have all vaccinations up to date including Hepatitis A and B. All positions are paid positions upon deployment and covered by USERRA. You need not reside in Rockland to be a member. For an application or for additional information go to the web site at www.dmatny4.com, e-mail INFO@DMATNY4.COM or call (845) 364-8923.

*EMS Week is
May 20 -26, 2007*

*On May 23, EMS Memorial Dedication at Empire State Plaza at 11 AM.
Remembering Frank P. Libraro from Glendale VAC and all of our fallen
Emergency Medical Service Providers.*



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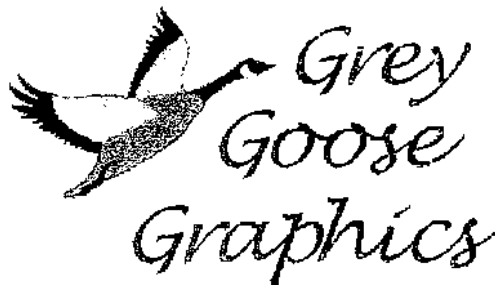
(Continued from page 7)

Executive Summary. The Commission recommended a series of health care facility closures, mergers, and realignments, amongst other changes in how New York's ailing health care system operates.

21. On the more positive side of New York's Health Care System, DOH released an analysis of the NYS Trauma System this past July. The 103 page report provides detailed information on the performance of the system and individual trauma centers during 1999 through 2002. You can grab a copy of the report off www.health.state.ny.us/nysdoh/ems/nystrauma.htm. Look for the 99-02 New York State Trauma Report link.

22. The International Association of Fire Chiefs (IAFC) and International Municipal Signal Association (IMSA) collaboratively published a very readable

18-page booklet called, "FCC Narrowbanding Mandate: A Public Safety Guide for Compliance." You might want to snag a copy before your next radio purchase. To make sure you understand the new rules (which will affect all public safety radio users), request your copy online at www.imsasafety.org/



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