THE BLANKET Special Edition
SEMSCO & SEMAC Meetings - May 2019

NYS DOH
State Emergency Medical Services Council (SEMSCO)
and
State Emergency Medical Advisory Committee (SEMAC)
Meeting Notes - 5/7/19 & 5/8/19

(Official minutes of the meetings will be released later by NYS DOH)

Teresa “Teri” Hamilton, Executive Vice President, is the NYS Volunteer Ambulance & Rescue Association’s representative on and a voting member of SEMSCO and a member of the Legislative Committee and Public Information, Education & Relations Committee.
Meeting was opened with Pledge of Allegiance.

Moment of silence observed in honor of EMS week to remember those who have passed and also to celebrate the EMS work done in the community.

New members were introduced
- Christopher Smith, Healthcare Association of New York State (HANYS)
- William Masterton, Suffolk REMSCO

Roll call conducted and quorum present.

Minutes of 3/6/19 meeting were approved.

Correspondence Report: None

Patty Bashaw, Chairperson’s Report:
County EMS Coordinators Association met 5/5/19. Will be speaking with various EMS associations to start a dialog and understand what they do and who they represent. There are core tasks that that can be agreed upon to work with legislators to keep EMS in eye of the state and communities.

Mark Philippy, 1st Vice Chair’s Report: None (excused due to attendance at a department funeral in home area)

Stephen Cady, 2nd Vice Chair’s Report: None

Bureau of EMS & Trauma Systems (BEMS&TS) Report
See separate report from Ryan Greenberg, Director, BEMS&TS

SEMAC & Medical Standards
- Protocol changes coming as seconded motions from SEMAC and the Medical Standards & Protocol Committee were approved unanimously with identical votes of YES-22, NO-0 and ABSTAIN-0:
  - NYC Rescue Task Force
  - Statewide BLS Protocols
  - Collaborative Protocols
- Mention was made of issues covered in other meetings:
Quality metrics items.
- Stop-the-Bleed initiative and school nurse need for certain patient specific orders
- EMS as essential service what it would and would not do.

Executive Committee Report
Committee met but are no action items for SEMSCO.

Education and Training Committee Report - See separate report for full information.
Moving AEMT curricular to National Standard curricular by September 2020 was discussed. In view of uncertainties over what will be in the final curricular a motion was made, seconded and passed to postpone a vote on the change until the next SEMSCO meeting on 9/25/19.

Systems Committee Report
Seconded motions were brought forth on 3 issues.
- Central Orleans Volunteer Ambulance, Inc. expansion of territory for all of Orleans County. Action was approved by Big Lakes REMSCO and appealed by Monroe Medi Trans (Monroe Ambulance). Systems Committee motion was made, seconded and passed to uphold the Big Lakes REMSCO decision. Statement in opposition to the expansion was made by SEMSCO member Alan Lewis on behalf of the United NY Ambulance Network. SEMSCO motion was made and seconded to uphold the REMSCO decision and passed by a roll call vote of YES-13, NO-9 and ABSTAIN-1.
- North Shore Ambulance & Oxygen Service, Inc. expansion of territory into Suffolk County. Action was approved by Suffolk REMSCO and appealed by Ambulnz, Inc. and several parties. Systems Committee motion was made, seconded and passed to uphold Suffolk REMSCO decision. Question was raised about letters of opposition being sent to BEMS&TS as permitted by Policy Statement 06-06. Reply was that letters were received after the ALJ decision and order was issued and there is a procedural question about whether they present new information. Issue was referred to Division of Legal Affairs and official decision has not yet been received. Motion was made, seconded and passed to postpone a vote until the 9/25/19 meeting.
- North Shore Ambulance & Oxygen Service, Inc. expansion of territory into Nassau County. Action was denied by Nassau REMSCO and appealed by North Shore Ambulance & Oxygen Service, Inc. ALJ recommended Nassau REMSCO action be reversed. Systems Committee seconded motion to remand issue back to Nassau REMSCO was deemed to be out of order so there is no seconded motion from the Systems Committee. Motion was made and seconded to overturn the Nassau REMSCO decision and grant the expansion. Statement in opposition to the expansion was made by SEMSCO member Alan Lewis on behalf of the United NY Ambulance Network. Roll call vote was taken with YES-7, NO-13 and ABSTAIN-1. Motion did not pass.

NOTE #1: After the 1st vote a question was raised about the number of affirmative votes need to pass a motion. It was stated that under the NY General Construction Law for public assemblies a majority of total members, whether seated or not, is needed. SEMSCO has 32 total members so 17 yes votes would be needed. Others felt a majority of members present could pass a motion. A recess was called to enable research to be done. James Tardy, DOH Division of Legal Affairs reported back that NY Public Health Law specifically details a majority of those present and that law supersedes the General Construction Law.

NOTE #2: Article 30, Section 3002 (3) states "Upon appeal from the appropriate regional council, the state council shall have the power, by an affirmative vote of a majority of those present, to amend, modify and reverse determinations of the regional councils...". Remand is not an option.
Legislative Committee Report

- Seconded motions were received from the committee to support the following 3 bills:
  - A00239/S04119 - Prohibits emergency service providers from selling patient health information without written consent.
  - A01208/S01805 - Authorizes collaborative programs for community paramedicine services as part of the hospital-home care-physician collaboration program.
  - A06211/S03526 - Authorizes payments to non-participating or non-preferred providers of ambulance services licensed under Article 30 of the Public Health Law.

- Al Lewis spoke about the Medicaid Crossover and Supplemental Medicaid Funds being kept in the Governor’s Budget. However, these funding cuts are expected to come up again next year. Medicaid pays at 75% of cost. Medicare also does not pay at cost. A study was cited that indicated ambulance services are underpaid $31 million annually. EMS staffing continues being an issue with ambulances sitting idle due to lack of staff. Several AMD national deployment requests last year were turned down due to the inability to cover local community contracts as well as national disasters. It was suggested a work force analysis be done about staffing needs 3 to 5 years in the future vs. expected training program graduates.

- Steve Kroll added comments about EMS agencies failing, determining what the EMS system should look like in the future, determine what is needed from NYS and doing any analysis of the state of EMS in the state.

EMS FOR CHILDREN (EMSC) Report

Martha Gohike, Program Manager advised:

- Last EMSC meeting was 3/12/19. Majority of it was spent getting DOH updates on injury prevention and opioid initiatives. Next meeting is 6/4/19 in Albany.

- Pediatric Prepared group meets monthly via webinar to discuss standards. Pediatric Prepared will be a required part of the Standards of Excellence voluntary program. Group has defined a Pediatric Emergency Care Coordinator and talked about equipment standards, continuing education requirements, skills competency, quality improvement component and safe transport component. Next webinar is 6/12/19. PECC application forms are available. Suffolk County region has largest number of PECCs.

STATE EMERGENCY MEDICAL ADVISORY (SEMAC) - DONALD DOYNOW, MD, CHAIRPERSON

Meeting opened with Pledge of Allegiance
Moment of silence in memory of James Bucci from Monroe County who was very active in a number of fire and EMS organizations including CHS Mobile Integrated Healthcare. He passed away unexpectedly on 5/2/19 at the age of 57.

New Member: Dr. David Markowitz, Adirondack-Appalachian REMSCO. He replaces Dr. August Leinhart.

Roll call conducted and quorum present.

Minutes of 3/5/19 meeting were approved.

Medical Standards Committee Report (see separate section for additional information)
- Protocol changes coming as seconded motions from the Medical Standards & Protocol Committee were minimally discussed and approved unanimously with identical votes of YES-16, NO-0 and ABSTAIN-0:
  - NYC Rescue Task Force
  - Statewide BLS Protocols
  - Collaborative Protocols
- Quality Metrics were discussed with more information to come in September.

Education & Training Committee Report (see separate section for additional information)
- Notification of change of exam location will be sent to Course Sponsor and CIC for passing on to students.
- Exam rescheduling tool is on-line rather than call in to BEMS&TS.
- CME manual update is close to coming out. Going up chain in BEMS&TS.
- New Instructor policy is in approval process.
- Staff changes and hiring being done for replacements.
- Spinal restriction educational material changes being made.
- AEMT curricular in NYS moving to National Standards was discussed. Motion was made that effective September 2020 AEMT courses in NYS will follow National Standard curricular. Blood draws by AEMTs at the request of police under the Vehicle & Traffic Law was brought up as marijuana testing requires early blood draw and leaving in a training module was suggested [see BEMS&TS Policy Statement 11-01]. Concern about this issue as well as incorporation of other additional optional educational modules was added to the motion. Issue of "Trained and Equipped" and variations in collaborative/regional/local/agency options was brought up. It was mentioned that the 2018 National EMS Scope of Practice issued by the National Highway Traffic Safety Administration is a more correct reference than National Standards curricular. There were comments from some that their areas did not have a problem with pass rates or textbooks. A comparison of existing Collaborative Protocols and proposed 2020 National Standards plus data on infrequently used skills was asked for. Motion was made and seconded to postpone consideration of the seconded E&T Committee motion till the 9/24/19 SEMAC meeting which was passed.
- EMT-CC to EMT-P bridge program is progressing with 98 of original 102 still enrolled. Second enrollment period ends in May with class starting in June.
- E&T Committee is working on a job description for Regional Faculty position.

State Trauma Advisory Committee
No report. STAC meets 5/15/19 in Troy, NY.
OLD BUSINESS
Dr. Lewis Marshall brought up issue of statewide ALS Protocols. Draft set of protocols was developed about 2008-2009. There was a hang up over calling them minimum standards, guidelines or protocols. It was referred for legal opinion and has not resurfaced. In light of adoption of ALS Collaborative Protocols it was suggested that conversations be held at the next Medical Standards meeting about creating minimum statewide ALS standards in NYS.
EMS as an essential service: 2 phone calls were held about the subject and it was determined that there are no essential services in NY under state law. It is unclear what declaring EMS as an essential service would do. Thought is to work with legislature on a clean slate to establish someone in each county to take responsibility for providing EMS and also to refer issue to SEMSCO for its input.

NEW BUSINESS
Trauma System in NYS
Cherisse Berry, MD, Bellevue Hospital repeated a presentation from the morning Medical Standards & Protocol Committee meeting.

Stop-the-Bleed
Issue of Scope-of-Practice of school nurses presented at the morning Medical Standards & Protocol Committee meeting was brought up. Suggestion was added that Commissioner of Health be able to issue waivers on requirement for patient specific orders when general public are trained or authorized to provide a medical intervention.

EMS Agency Closures
Ryan Greenberg advised there were 20 closures in 2018 and about same pace in 2019. Some were planned and some not. It was asked that BEMS&TS be notified as soon as possible so that options and advice can be offered before a crisis mode is encountered.

EMS STAFF REPORT: RYAN GREENBERG, DIRECTOR, BEMS&TS (Compilation of information given at SEMAC, SEMSCO and committee meetings)
- Emergency Triage, Treatment & Transport (ET3) is a Centers for Medicare & Medicaid Services initiative to offer alternative transport destinations to Medicare patients. Not everyone needs to be transported to a hospital. Telemedicine is expected to be a big part. Half a dozen agencies from around the state have approached BEMS&TS about submitting proposals.
- Mutual aid agreement to ensure coverage is needed by every EMS agency. Article 30 provides for local REMSCO review and approval. There should be some reciprocity, not one agency doing most if not all of the aid to another agency. BEMS&TS Policy Statement 12-06 is being rewritten.
- Bid to revamp back end of administrative licensure processes will go out. Expect changes in next 12 to 24 months.
- E-mail addresses will be set up for administrative submissions and automatic receipts and acknowledgements.
- Staffing: Jean Taylor has been promoted to Deputy Director, Education & Certification Services. She had been acting in the position since Andy Johnson left. Teresa Allen who handled reciprocity, verifications, ADA accommodations, etc. was promoted to a DOH position. Waivers were received to hire people.
- CME Recertification Program changes coming, hopefully, in the summer months.
- On-line testing, verifications, course sponsor paperwork, CME Program has or is going electronic through e-mail.
- Instructor Policy update has been completed. Expect publication in 4 to 8 weeks.
Innovative ways to deliver education are being looked at. There is current policy limiting online education to 20% that is being re-evaluated. Hands-on skills need to be demonstrated and some information needs to be delivered in person. Maybe 50% online is OK. Does CIC need to be in each distributed learning site? BEMS&TS wants to hear about better ways or proposals to deliver EMS education.

EMT-CC to EMT-P bridge program has enrolled 102 of 1,500 EMT-CCs in state. FISDAP platform is used for exams that test people along the course. The course is not easy, takes up a lot of time and involves a lot of self-learning. Teaching to National Standards is expected to better prepare students to pass the EMT-P exam. Anthony Conrady, Director, Northwell Health’s Center for Learning & Innovation advised in a message to DOH:

“This program is not designed around the students’ perceived notion of what is or is not on the written NYS paramedic exam but what is expected of the national EMS education standards. Also, students’ previous experience with lecture based programs and continuing education platforms have placed them at a slight disadvantaged as they are expecting to be spoon fed the material. It does take some time for the students to get familiar with the learners directed activities to discover this information.”

Enrollment for 2nd class ends in May.

Statewide BLS and Collaborative Protocols updates have been approved by Commissioner of Health, will be posted on the BEMS&TS web site and go into effect 8/1/19. On-line learning will be provided on DOH Learning Management System (LMS) possibly in June. Regional Program Agencies may be given access to use LMS for local training.

State Trauma Advisory Committee (STAC): Trauma Center verifications by American College of Surgeons (ACS) are continuing on a regular basis. Information from STAC indicated in the state of NY there are the following number of Trauma Centers:

- 21 level 1 Adult (1 is Provisional)
- 13 level 2 Adult (4 are Provisional
- 10 level 3 Adult (2 are Provisional
- 7 level 1 Pediatric (1 is Provisional and 2 are free standing)
- 9 level 2 Pediatric (3 are Provisional

Trauma Centers would like more interaction with local EMS providers and can be asked for patient outcome information. Copy of letter to hospital CEOs about sharing information is on the DOH website. Next STAC meeting is 5/15/19 in Troy, NY.

Dr. Cherisse Berry, is working on assessment of NYS trauma system. They are also looking to define what Level 3 Trauma Center would look like in NYS.

EMS For Children: Pediatric Emergency Care Coordinator program has 114 programs around the state.

EMS Standards of Excellence program seeks to raise the bar on clinical quality service. It is a voluntary accreditation program. There will be 3 levels of recognition covering 8 aspects with about 20 points in each including leadership, operations, finance, medical direction, etc.

Data analysts are processing information to get it back out to regions and agencies. There are 255 agencies on NEMSIS 3 with 1,800 still on NEMSIS 2. It is hoped all agencies will be converted to NEMSIS 3 by 12/31/19. New analytic software platforms such as Tableau are being used and/or looked at. 7 statewide quality metrics have been selected with more information to come in September.

Vital Signs will be 10/24/19 to 10/27/19 in Buffalo, NY.

The Bureau has a Face Book page - New York State Health Department EMS Community. It is up to 1,200 followers. Newsletter mentioned at previous meeting may not come to pass.

EMS WEEK: starts on Sunday, 5/19/19. The Bureau would like every EMS agency in the state to hold a community outreach “EMS on Tour” day on Sunday 5/19/19 from 12:00 PM
to 4:00 PM. Get out in your community (not at your building) and educate the community about EMS and what we do. This is also a good recruitment tool. On Tuesday 5/21/19 the EMS Memorial will be held. This year 7 names will be added...all 7 died as the result of 9/11 related illness. Included is William Ryan of Bay Community VAC, District 18, NYSVARA.

- For May meetings for EMS week a request was sent out to SEMSCO members to come in dress uniform if available.
- Anecdotal comments were made about 3 of Greenberg’s encounters with local EMS providers in Randolph (Cattaraugus County), Ithaca (Tompkins County) and Manhattan.

MEDICAL STANDARDS & PROTOCOLS COMMITTEE – LEWIS MARSHALL, MD, CHAIRPERSON

Protocol Changes Submitted for Approval:
- NYC Rescue Task Force: Triage in warm zone of red tag patients. Motion to approve made, seconded and passed unanimously.
- Statewide BLS Protocols: Change patient destination from “hospital” to “facility” to facilitate potential adoption of Centers for Medicare * Medicaid proposals for Emergency Triage, Treatment & Transport (ET3) models. Motion to approve made, seconded and passed unanimously.
- Collaborative Protocols: Change patient destination from “hospital” to “facility” to facilitate potential adoption of Centers for Medicare & Medicaid proposals for Emergency Triage, Treatment & Transport (ET3) models. There was also wording added about drug formulary changes needed due to drug shortages. Motion to approve made, seconded and passed unanimously.

Review of State Quality Metrics Data:
SEMAC and Medical Standards members were surveyed about 15-17 suggested pre-hospital quality measures to review. Data needs to be available electronically through NEMSIS 3. The number has been pared down to the following 7:
- % of stroke patients transported to approved stroke center
- % of patients given blood glucose check
- % of intubated patients with ETOC
- % of trauma patients transported per CDC trauma triage algorithm
- % Opioid OD that were treated but refused transport
- % Cardiac arrest with ROSC
- % chest pain patients with 12 lead EKG

Stop-the-Bleed
Discussion about school nurse Scope of Practice and ability to apply hemostatic dressing and commercial tourniquet. These are FDA approved items and are interpreted by the NYS Department of Education to require patient specific order to use even in an emergency situation. School nurses can teach Stop-the-Bleed techniques and school administrative and custodial staff can administer these items. Without patient specific orders. There were previous issues with AEDs, epinephrine auto-injectors and naloxone (Narcan) which were addressed with changes to Article 30 of the Public Health Law. Motion was made, seconded and passed to send letter asking Commissioners of Health and Education work together to allow school nurses to better treat severe bleeding.

Trauma System in NYS
Cherisse Berry, MD, Bellevue Hospital was introduced as the ACS representative to SEMAC. She is also the Co-Chair of the STAC Systems Committee. She repeated a presentation on doing a global assessment of the trauma system in NYS as compared to other states and past history to determine where we stand and where we need to get better including strategic goals. Support for trauma system can then be sought from public and legislature. Using the Benchmark Indicators and Scoring Tool (BIST) 16 indicators have been selected and validated. Input will be sought from a broad base of stakeholders including SEMAC and SEMSCO members.

OLD BUSINESS - none

NEW BUSINESS - none

EDUCATION AND TRAINING COMMITTEE – MICHAEL MCEVOY, CHAIRPERSON

CME Based Recertification Program: Jean Taylor, Deputy Director, Education & Certification Services reported:

- Manual is in final draft form and close to being approved.
- Forms are being redone.

Instructor Policy changes are in the DOH pipeline for approval.

Long and short form course sponsor renewal forms went out.

Spinal motion restriction training was discussed. There were evidently videos showing patients with cervical collars walking into emergency departments. Educational materials are being revised.

AEMT Curricular and Skills use in NYS vs. National Standard Curricular

The AEMT level in NYS incorporates a number of skills not found in the National Standards version of the level. There is no NY version of an AEMT textbook and many course sponsors routinely use an EMT-P textbook which can be 4,000 pages vs. 500 pages in an AEMT book. Exam results have been pitiful possibly due to the confusing educational material used.

Mike McEvoy presented information that showed there were 276 practicing AEMTs in the last 2 years with the Mountain Lakes Region having the highest number. The number is slowly increasing. NEMSIS data involving 2 versions over 18 months indicate there were 11,000 calls with AEMT skill use. Several specific skills were further documented:

- Direct Laryngoscopy: 29 instances in 1st 9 months under NEMSIS 2.2.1 and 1 use in latest 9 month period under NEMSIS 3.4.0
- Endotracheal Intubation: 259 instances.
- Supraglottic Airway: 71 instances

New National Standards for the AEMT level scope of practice are expected in September 2020 which will add Supraglottic Airway use and administration of certain drugs which are already in the NYS version of AEMT along with venous blood sampling. Capnography and SubQ epi were also mentioned as being in a skill set.

In addition to skill retention there is an issue with reciprocity with a number the 16 to 20 of AEMTs from other states opting to drop to EMT level in NYS rather that find course sponsors willing to offer training on the above skills.

Potentially, a new national AEMT Scope of Practice could add capnography and venous blood sampling but this could change.

Motion was made that effective with courses beginning in September 2020 NYS would adopt use of the National AEMT Curricular and eliminate skills that are currently added to in by NYS. Motion was passed and will go on to SEMAC & SEMSCO for consideration.
There is a TAG working on a job description for Regional Faculty.

EMT-CC to EMT-P Bridge Program:
- 102 students enrolled in 1st class in January 2019 and 98 remain in the program.
- Students report on-line course work is harder than they expected.
- Northwell Health had a number of technical issues but the program is now stable.
- Enrollment for 2nd class closes end of May.
- There are 1,500 EMT-CC personnel in NYS.

FINANCE COMMITTEE - STEVEN KROLL, CHAIRPERSON

Project started on evaluation of funding category Aid to Localities and it use for support of EMS Course Sponsors. Items to be looked at include:
- Course costs
- Other inputs
- Cost shifting to students
- Books and fees
- Appropriate funding and reimbursement formula.

In response to a question at SEMSCO it was advised that the committee has not discussed if EMS education costs for students should be fully funded. It was mentioned that fire service students do not pay for their courses.

SYSTEMS COMMITTEE - YEDIDYAH LANGSAM, PhD, CHAIRPERSON

3 appeals of Regional EMS Council actions were presented:
North Shore Ambulance & Oxygen Service, Inc. expansion of territory into Nassau County. Action was denied by Nassau REMSCO and appealed by North Shore Ambulance & Oxygen Service, Inc. ALJ recommended Nassau REMSCO action be reversed. Motion was 1st made and seconded to uphold Nassau REMSCO action but was defeated by a roll call vote of YES-3, NO-5 and ABSTAIN-1. Motion was then made and seconded to remand issue back to Nassau REMSCO and was passed with YES-5, NO-3 and ABSTAIN-1.

North Shore Ambulance & Oxygen Service, Inc. expansion of territory into Suffolk County. Action was approved by Suffolk REMSCO and appealed by Ambulnz, Inc. and several parties. Motion was 1st made and seconded to remand action back to Suffolk REMSCO but was defeated by a roll call vote of YES-3, NO-5 and ABSTAIN-1. Motion was then made and seconded to uphold Suffolk REMSCO decision and was approved by a roll call vote of YES-5, NO-4 and ABSTAIN-0.

Central Orleans Volunteer Ambulance, Inc. expansion of territory for all of Orleans County. Action was approved by Big Lakes REMSCO and appealed by Monroe Medi Trans (Monroe Ambulance). Motion was made and seconded to uphold the REMSCO decision and passed by a roll call vote of YES-5, NO-4 and ABSTAIN-0.

BEMS&TS Operations Report - Daniel Clayton & Dana Jonas
Verbal report was not prepared but it was indicated a written report would be sent to committee members by the end of the week.

OLD BUSINESS - None

NEW BUSINESS
There was discussion of a need for NYS Department of Transportation permit sticker on ambulances not carrying patients while traveling on highways. One agency reported a NYS police trooper advised sticker was needed if an ambulance is out for maintenance or crew personal run. However, DOT sticker may only be needed for dealer owned vehicles weighing over 10,000 lbs. GVW while traveling on highways. NYS certified ambulance vehicles have not been known to need DOT sticker. Issue will be researched.

**LEGISLATIVE COMMITTEE - ALAN LEWIS, CHAIRPERSON**

Discussed the following 3 bills and motions made, seconded and passed to support the bills:
- A00239/S04119 - Prohibits emergency service providers from selling patient health information without written consent.
- A01208/S01805 - Authorizes collaborative programs for community paramedicine services as part of the hospital-home care-physician collaboration program.
- A06211/S03526 - Authorizes payments to non-participating or non-preferred providers of ambulance services licensed under Article 30 of the Public Health Law.

More information is needed on the following bill and it was not brought forth to SEMSCO with a recommendation:
- A01050/S01480 - Requires epinephrine auto-injector devices at children's overnight, summer day and traveling summer day camps.

**SAFETY COMMITTEE - MARK PHILIPPY, CHAIRPERSON**

Meeting was cancelled. No report.

**PUBLIC INFORMATION, EDUCATION & RELATIONS (PIER) COMMITTEE - CHAIRPERSON POSITION IS VACANT**

Meeting was canceled. Meeting was also canceled in May 2018, September 2018 and January 2019.

**EMS COUNTY COORDINATORS ASSOCIATION - JOHN BARATTINI (MADISON COUNTY), CHAIRPERSON**

16 members were seated at the table. NYS has 57 independent counties plus 5 in NYC. Minutes of 1/14/19 meeting were approved. Solicitation was made for additional members for standing committees and several volunteered. By-laws were sent out and following sections are being reviewed:
- Article 2, Section 4
- Article 3, Section 1
- Article 3, Section 4
- Article 4, Section 3
- Article 5, Section 1

Meetings are concurrent with SEMAC/SEMSCO meetings and Vital Signs conference. Conference calls may also be held.

Issues affecting EMS were discussed: EMS is not an essential service under law. Status of fire and police is questionable. Expect opposition from town and villages to proposals involving funding. Direct pay legislation. Was brought up.

Association should coordinate with other associations such as NYSVARA, UNYAN, HASNY FASNY, Fire Chiefs, etc.
Role of EMS County Coordinator - What involvement is there in mutual aid and training? Send in any job descriptions to Chairperson.
Treasury: About $2,000.00.
Best practices can be shared by DOH Facebook.
Access to NEMSIS data would be helpful.
Mission Statement was brought up.
Next meeting is 7/11/19 at 10:00 AM at Madison County Emergency Management in Wampsville and by webinar.

UPCOMING MEETINGS:
- SEMAC/SEMSCO will be September 24&25, 2019 and January 14&15, 2020
- State Trauma Advisory Committee (STAC) meetings will be 5/15/19, 9/10/19 and 1/28/20.
- EMS for Children (EMSC) meetings will be 6/4/19, 9/17/19 and 12/3/19
Location for of the above meetings is the Hilton Garden Inn, Troy, NY.