

PROTECTIVE SERVICES COMMITTEE MEETING
Held in Room #318
Members: Chairwoman Nacerino & Legislators Sayegh & Sullivan

Thursday **August 19, 2021**
(Immediately Followed the Rules, Enactments & Intergovernmental Relations Comm. Mtg.)

The meeting was called to order at 8:08PM by Chairwoman Nacerino who requested Legislator Sullivan lead in the Pledge of Allegiance. Upon roll call Legislator Sullivan and Chairwoman Nacerino were present. Legislator Sayegh was absent, Legislator Albano sat as a member of the Committee in her absence.

Item #3 - Approval/ Budgetary Amendment (21A071)/ Required because the Gasoline Pumps at the Sheriff's Department are no Longer in Use, they Use the Pumps located at Donald B. Smith Campus. Central Svcs. Will Charge Back the Gasoline Usage to the Sheriff's Department (Also see Fund Transfer 21T137)

Chairwoman Nacerino made a motion to approve Budgetary Amendment (21A071)/ Required because the Gasoline Pumps at the Sheriff's Department are no Longer in Use, they Use the Pumps located at Donald B. Smith Campus. Central Svcs. Will Charge Back the Gasoline Usage to the Sheriff's Department; Seconded by Legislator Albano. All in favor.

Item #4 - Approval/ Fund Transfer (21T137)/ To Cover 2nd Quarter Chargeback from BES Gas Pumps (Also see Fund Transfer 21A071)

Chairwoman Nacerino stated this is a request to transfer funds within the Sheriff's Department to cover the costs of the Gasoline, as referenced in Agenda Item #3. She stated the amount is \$48,750.00.

Chairwoman Nacerino made a motion to Approve Fund Transfer (21T137)/ To Cover 2nd Quarter Chargeback from BES Gas Pumps; Seconded by Legislator Sullivan. All in favor.

Item #5 - Approval/ Fund Transfer (21T147)/ Funds to Cover Commercial Vehicle Enforcement through the End of the Year/ Sheriff Robert Langley (also reviewed at 8/10/21 Personnel Mtg.)

Chairwoman Nacerino made a motion to Approve Fund Transfer (21T147)/ Funds to Cover Commercial Vehicle Enforcement through the End of the Year; Seconded by Legislator Albano. All in favor.

Item #6 - Approval/ Municipal Certificate of Need Application/ Bureau of Emergency Services Commissioner Ken Clair (Tabled from the July 21, 2021 Protective Mtg.)

Chairwoman Nacerino stated present for agenda item #6 were: Bureau of Emergency Services Commissioner Ken Clair, Bureau of Emergency Services (BES) Director of EMS Casey Quake and Director of Purchasing Alex Mazzotta. She stated this matter was tabled last month, because there was agreement by the Protective Services Committee Members that there was more

information needed. She stated she is the Legislative Representative to the Fire Advisory Board. She stated in attending their monthly meetings she has learned a lot and understands the importance of the Certificate of Need (CON).

Emergency Services Director of EMS Casey Quake presented a PowerPoint presentation (copy attached) that provided an explanation of Emergency Medical Services (EMS), Advanced Life Support (ALS) which the services are administered by a Paramedic who has received 1,200-1,800 hours of education in advanced assessment and Clinical Skills, and Basic Life Support (BLS) which the services are administered by an Emergency Medical Technician who has received 180 hours of education in basic assessment & clinical skills. He stated the contract with the current ALS-FR (First Response) and Ambulance Service expires on December 31, 2021. He stated in May of 2021 an ALS-FR and Ambulance Services/ Request for Proposal (RFP) Task Force was formed. He explained this was done to prepare for the issuance of the County's RFP. The Task Force members consist of 2 representatives from the Putnam County BES, 2 representatives from the Putnam County Fire Advisory Board, and 2 representatives from the Putnam County EMS Council, Inc. He stated among other recommendations, the Task Force made the recommendation that Putnam County apply for a CON. He stated basically, Putnam County has an EMS system that is dependent on volunteerism, which is declining. He continued to speak to this matter.

Chairwoman Nacerino made a motion to waive the rules and accept the additional; Seconded by Legislator Albano. All in favor.

Chairwoman Nacerino stated the additional items include two (2) letters: 1. From: Town of Patterson Supervisor Williams dated August 11, 2021 expressing the Town of Patterson Board's support of the County's applying for a CON and 2. Carmel Volunteer Ambulance Corporation President Cindy Jacobsen dated August 19, 2021 expressing they do not support the County applying for a CON.

Chairwoman Nacerino stated she believes this proposal to be effective and efficient in the effort to meet the EMS demands of the County while remaining fiscally responsible. She stated by the County having a CON it will widen the vendors that the County can choose from to supply ALS-FR and Ambulance Services. She stated this is a crucial service to the residents of Putnam County.

Emergency Services Director of EMS Casey Quake stated the entire objective through this process has been the service to our patients and the delivery of patient care.

Legislator Albano questioned if there will be an additional liability to the County.

Emergency Services Director of EMS Casey Quake stated there will be a shift in liability to the County. He stated the "Service Delivery" is assigned to the Vendor, it cannot be transferred it can only be assigned. He stated essentially the County would be contracting with the vendor to provide the service. He stated it does allow for the County to become operational as our own entity in the two (2) year period, but it does not force the County to do that, it is just an option. He continued to speak to this matter and the different options.

Purchasing Director Alex Mazzotta stated one (1) RFP will be published. Vendors who have their own CON can apply and Vendors who do not have a CON will be allowed to apply. He stated this will be the first time posting the RFP in this manner. He explained the past two (2) times he has done this as Purchasing Director, the RFP was directed to Vendors with a CON only. He stated there are usually approximately three (3) Vendors who respond.

Legislator Albano expressed he does have a concern with the liability portion of this. He stated he does not understand if a Vendor is in this business, why would they not want to have a CON.

Emergency Services Director of EMS Casey Quake stated the primary reason is because it is a rigorous process and he spoke to several other reasons.

Legislator Sullivan stated he believes this will provide the County with the best opportunity to get the best bids and responders to the RFP. He stated it will also provide flexibility to the County in the selection process based on the responses to the RFP. He stated he is in favor of the County applying for a CON.

Emergency Services Director of EMS Casey Quake provided clarity that this request is for approval of the County to make an application for a CON.

Purchasing Director Alex Mazzotta stated the timing is important. He stated if the County does not submit an application for a CON, then the County will not receive a large response to the RFP. He stated by approving the request to apply for the CON, does not mean that it is the option the County will move forward with. He stated it will provide the County to make an informed decision.

Legislator Montgomery questioned if this presentation was given to the County Ambulance Corps.

Emergency Services Director of EMS Casey Quake stated they did not. He stated they presented it at the Task Force meeting where members were present from the different agencies. He stated the representatives on the Task Force, were selected by their peers in the departments they represent.

Legislator Montgomery stated she would like this presentation to be given to all of the local agencies. She stated she does not know the details, but is aware in light of COVID there is a lot of controversy surrounding the CON. She stated she relies on her local representatives. She stated also this will not solve the volunteer issue.

Emergency Services Director of EMS Casey Quake explained there has been wording added to the RFP, in response to the specific request from the volunteer Ambulance Corp leadership and the Volunteer Fire Department leadership to include the addition of BLS Ambulances to supplement their coverages to support them during their lack of volunteerism while they are able to rebuild. He stated he, Commissioner Clair and Director Mazzotta have worked very hard to make sure the flexibility is in the RFP, to add or subtract BLS Units as needed.

Chairwoman Nacerino facilitated further discussion on this topic.

Emergency Services Director of EMS Casey Quake stated for clarification, the RFP is for Advanced Life Support (ALS) only. He stated this RFP will not affect, and noted the County has no authority to affect, the BLS CONs, they are held by the Fire Departments and the Ambulance Corps.

Chris Tobin, Philipstown Volunteer Ambulance Corps. stated that they submitted a letter to the BES with some questions that have not yet been answered.

Emergency Services Director of EMS Casey Quake stated they have received a few letters from the different municipalities asking questions. He explained all the questions will be addressed either via an in person meeting or some other form of a meeting.

Legislator Montgomery stated she would like for the municipalities questions to be answered in person. She stated also, she has requested a copy of tonight's PowerPoint, and would like it to include the names of the Task Force members and which department they are representing.

Chairwoman Nacerino made a motion to approve the Municipal Certificate of Need Application; Seconded by Legislator Sullivan. All in favor.

Item #7 - Approval/ Acknowledge the Putnam County EMS Council as the Putnam County EMS Advisory Board Under NY County Law CNT 223-b. titled EMS Training and Mutual Aid Programs/ Bureau of Emergency Services Commissioner Ken Clair (Tabled from the July 21, 2021 Protective Mtg.)

Chairwoman Nacerino stated that Commissioner Clair has submitted a letter requesting the withdrawal of this request. She stated therefore there is no action needed.

Item#8- Other Business - None

Item #9- Adjournment

There being no further business at 8:44pm Chairwoman Nacerino made a motion to adjourn; Seconded by Legislator Sullivan. All in favor.

Respectfully submitted by Deputy Clerk Diane Trabulsy.



Emergency Medical Services in Putnam County

An Overview and Introduction

**Including the Municipal Certificate of Need Process
and RFP-Task Force Recommendations**

Emergency Medical Services (EMS)

- ▶ Emergency Medical Services, more commonly known as EMS, is a system that provides emergency medical care. Once it is activated by an incident that causes serious illness or injury, the focus of EMS is emergency medical care of the patient(s).
- ▶ EMS is most easily recognized when emergency vehicles or helicopters are seen responding to emergency incidents. But EMS is much more than a ride to the hospital. It is a system of coordinated response and emergency medical care, involving multiple people and agencies. A comprehensive EMS system is ready every day for every kind of emergency.

Emergency Medical Services (EMS)

- ▶ EMS is an intricate system, and each component of this system has an essential role to perform as part of a coordinated and seamless system of emergency medical care. An EMS system comprises all the following components:
 - Agencies and organizations (both private and public)
 - Communications and transportation networks
 - Trauma systems, hospitals, trauma centers, and specialty care centers
 - Rehabilitation facilities
 - Highly trained professionals
 - Volunteer and career prehospital personnel
 - Physicians, nurses, and therapists
 - Administrators and government officials
 - An informed public that knows what to do in a medical emergency

EMT vs. Paramedic

- ▶ **Emergency Medical Technician (EMT)** students complete a course that is a minimum of 170 hours in length. EMTs are educated in assessing a patient and determining if any life-threatening injuries or illnesses may be present. This includes splinting injuries for a patient following a motor vehicle collision, administering life saving epinephrine for a patient suffering an allergic reaction, or even administering CPR to a patient in cardiac arrest. Other skills the EMT will learn include oxygen administration, bag valve mask ventilations, delivery of a newborn, and even administration of several medications. An EMT's assessment skills, the ability to quickly recognize if someone is dying, is the best tool in their toolbox and the primary focus of the EMT education.

EMT vs. Paramedic

- ▶ **Paramedic** students complete a program between 1,200 to 1,800 hours and may last up to 18 to 24 months. Topics covered in paramedic courses include anatomy and physiology, cardiology, medications, and medical procedures. Paramedic courses build on EMT education and teach skills such as administering medications, starting intravenous lines, providing advanced airway management, EKG Interpretation for patients, and learning to provide emergency care to patients with life-threatening medical or traumatic emergencies. Caring for the victims of a motor vehicle crash, interpreting the EKG of a heart attack patient, or delivering a baby; these are all patients a paramedic must be prepared to assist during their shift. It never gets boring! Through a combination of lectures, skills labs, followed by hospital internship, then EMS field internship, students are prepared to pass the national certification exams to achieve the highest certification level of pre-hospital care provider in the United States.

**Emergency Medical Services
(EMS)**

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graph TD; EMS[Emergency Medical Services (EMS)] --- ALS[Advanced Life Support (ALS)]; EMS --- BLS[Basic Life Support (BLS)];
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**Advanced Life Support
(ALS)**

Paramedic

1,200 – 1,800 Hours of Education

Advanced Assessment & Clinical Skills

(Cardiac Monitoring, Medication Administration,
IV Access, Advanced Airway Management,
Advanced Patient Assessment)

**Basic Life Support
(BLS)**

Emergency Medical Technician (EMT)

180+ Hours of Education

Basic Assessment & Clinical Skills

(Wound Care, Bleeding Control, CPR/AED,
Oxygen Administration, Basic Airway
Management)

The Emergency Medical Services System in Putnam County

- ▶ The Emergency Medical Services System in Putnam County is diverse in its composition and continues to present unique challenges for agencies and administrators alike.
 - ▶ 12 Ambulance Services
 - ▶ 6 Fire Department (Brewster, Kent, Lake Carmel, Mahopac Falls, Mahopac, Patterson)
 - ▶ 1 Hybrid (Paid and Volunteer)
 - ▶ 5 Volunteer
 - ▶ 4 Independent (Carmel, Garrison, Philipstown, Putnam Valley)
 - ▶ 3 Hybrid
 - ▶ 1 Volunteer
 - ▶ 1 Municipal (Patterson, Town Of)
 - ▶ 1 Industrial (Watchtower)
 - ▶ 3 BLS First Responder (Non-Transporting Agencies)
 - ▶ 1 Contracted Advanced Life Support Provider

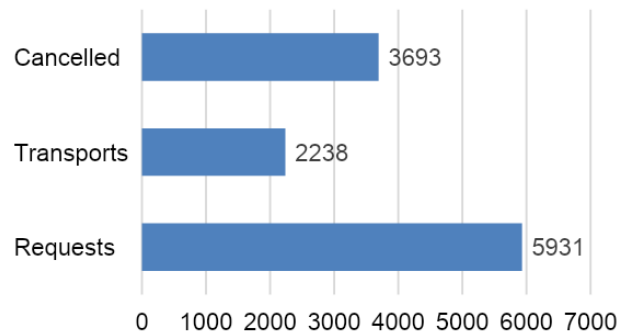
The Emergency Medical Services System in Putnam County

- ▶ EMS Systems throughout New York State continue to face a growing shortage of certified providers. Statewide the number of certified EMS providers has declined 9% over the past ten years. Putnam County is not omitted from these challenges, in fact chute and response times are nearing critical lows and our system faces collapse without continued support.
- ▶ The Office of EMS has and will continue to focus on the revitalization of the volunteer and career workforce throughout our catchment area. This will be done through initial and renewing education programs, department/agency support and advocacy by our leadership at local, state and national forums.

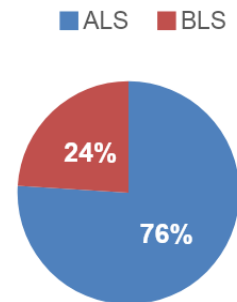
The Emergency Medical Services System in Putnam County

- ▶ Advanced Life Support (Paramedic) Services are currently provided by EMStar Ambulance under contract to Putnam County and remain a vital component of our EMS System. In 2020 our ALS units responded to 5,931 calls and over 2,238 patients received advanced life support care. There are 4 paramedic response vehicles strategically positioned throughout the county to respond along with the local Basic Life Support (BLS) agency/ambulance on calls for service as deemed necessary by the Emergency Communications Center/PSAP.

2020 Advanced Life Support Request/Disposition Summary



2020 ALS/BLS Distribution Summary



ALS-FR (First Response) and Ambulance Services/RFP Task Force

- ▶ The contract for this service ends on 12/31/2021. In preparation to issue a Request for Proposals, The Bureau of Emergency Services was tasked by the Putnam County Executive's Office with the formation and oversight of a task force to address the concerns and requests of the county's fire departments and ambulance services (volunteer and municipal) in relation to the ALS-FR/Ambulance Services in Putnam County. That task force was formed in May of 2021.
 - ▶ 2 representatives appointed from the Bureau of Emergency Services by the Commissioner of Emergency Services
 - ▶ 2 representatives from the Putnam County Fire Advisory Board elected by their peers.
 - ▶ 2 representatives from the Putnam County EMS Council, Inc. elected by their peers
- ▶ The **mission** of this task force is to work in a collaborative manner with stakeholders to facilitate a system of prehospital care that is based upon the best possible outcomes for patients and communities – in all circumstances. There are six guiding principles that have been established by the EMS Agenda 2050 that will ultimately guide the work of this task force – Adaptable and Innovative, Inherently Safe and Effective, Integrated and Seamless, Reliable and Prepared, Socially Equitable, Sustainable and Efficient.

ALS-FR (First Response) and Ambulance Services/RFP Task Force

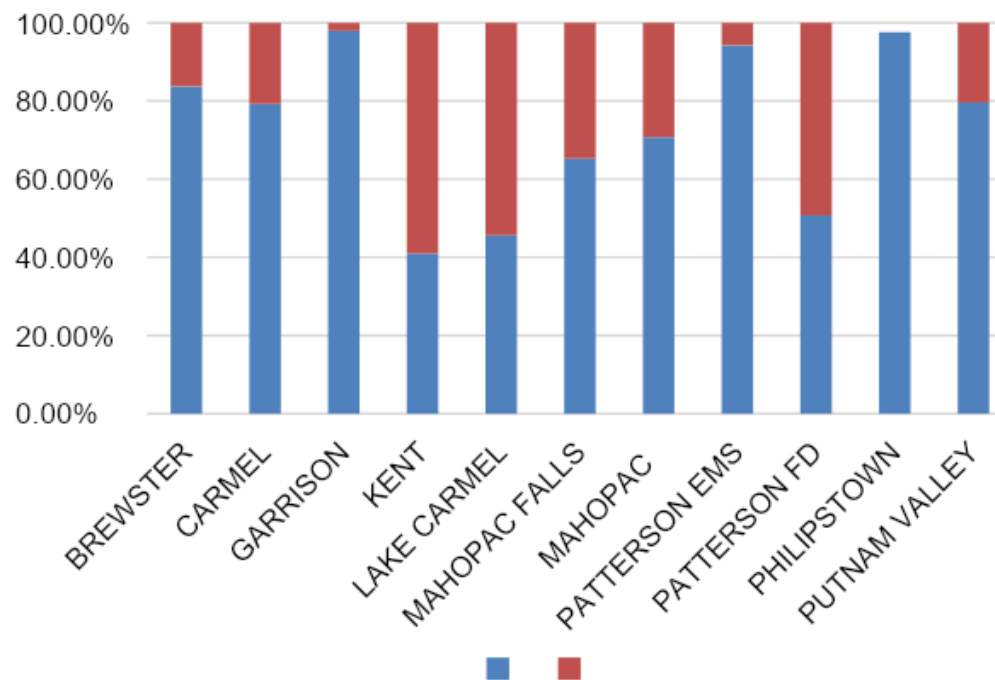
- ▶ The **objectives** of this task force include but are not limited to:
 - ▶ Advocate for the development of a coordinated emergency medical services system based upon the mission statement of this task force.
 - ▶ Identify community and provider expectations for the delivery of EMS.
 - ▶ Provide education and guidance to county/local leadership, legislators and other stakeholders on current laws, regulations, and the mission of the emergency medical services system.
- ▶ Identify models for the improvement of the provision of EMS in Putnam County:
 - ▶ inclusive of regulatory considerations
 - ▶ identify shared services opportunities
 - ▶ review emergency medical services data
 - ▶ review best practices and applicable standards

ALS-FR (First Response) and Ambulance Services/RFP Task Force

- ▶ The task force completed its work and delivered their final report to the Commissioner of Emergency Services and the Director of EMS on June 15, 2021.
- ▶ The following items summarize their recommendations:
 - ▶ Obtain a Municipal Certificate of Need / Operating Authority
 - ▶ Adjust Unit Configuration and Staffing as noted.
 - ▶ 5 ALS-FR Units (Including 24/7 Supervisor, Dedicated to Putnam County)
 - ▶ 3 BLS Type I, III or Medium Duty Ambulances
 - ▶ Vehicle Locations/Staffing
 - ▶ Medic 1 - Town of Philipstown
 - ▶ Medic 2 / BLS 2 (24/7) - Town of Kent
 - ▶ Medic 3 / BLS 3 (0500-2100) - Town of Carmel, Mahopac/Mahopac Falls
 - ▶ Medic 4 / BLS 4 (24/7) - Town of Southeast
 - ▶ Medic 10 - Town of Carmel (Putnam County Bureau of Emergency Services)
 - ▶ All Paramedic Units are to be staffed 24/7
 - ▶ Additional recommendations included adjustments to minimum equipment standards, personnel credentialing and oversight, vendor reporting requirements, terms of the contract and enforcement of those terms.

A Paradigm Shift Must Occur

- ▶ We currently have an EMS System that is dependent on declining volunteerism. We need to support that system while we work as a community to revitalize volunteerism in Emergency Services.
- ▶ Mutual Aid Usage is growing, chute and response times exceed industry accepted standards.
- ▶ The time to act is now. Through contract revision and policy changes we can significantly improve the delivery of services.



It Is Our Responsibility

- ▶ The application for and acquisition of a Municipal Certificate of Need allows Putnam County and its legislature to execute a contract for Advanced Life Support-First Response and Ambulance Services that maintains fiscal responsibility and bears in mind the tenants of the EMS Agenda: 2050 creating a system of care that is:
 - ▶ Adaptable and Innovative
 - ▶ Inherently Safe and Effective
 - ▶ Sustainable and Efficient
 - ▶ Socially Equitable
 - ▶ Integrated and Seamless
 - ▶ Reliable and Prepared

Obtaining a Municipal Certificate of Need (CON) and Operating Authority

- ▶ The primary recommendation of the task force surrounds the application for and acquisition of a Municipal Certificate of Need / Operating Authority. This recommendation is made based upon the following items extracted from the NYS Department of Health, Bureau of EMS and Trauma Systems Policy Statement #09-01 Municipal Certificate of Need Applications.
 - ▶ The municipality is responsible for this EMS agency, even if they enter into a contract with another organization (vendor) to provide services.
 - ▶ An operating certificate obtained under the provisions of 3008 section 7(a) for the original two-year authority and the subsequent permanent authority may not be transferred. *It may however be assigned as noted above to a vendor for the provision of services. The assigned vendor need not hold a certificate of need/operating authority as they will operate under the Municipal Certificate.*
 - ▶ If the municipality fails to become operational during the initial two years and does not rescind the declaration, it may not file another municipal declaration to establish an EMS service under the provisions of 3008 section 7(a).
 - ▶ The municipality may contract for billing services however it must remain the billing entity.



Municipal Certificate of Need and Operating Authority a Historical Perspective

- ▶ Traditionally, in order for an EMS service to gain operating authority , New York State Public Health Law Article 30 requires that the service make application to the local Regional EMS Council(s) in the proposed area(s) of operation, bear the burden of demonstrating that the definition of public need has been met at a public hearing, obtain a positive determination of public need from the Regional Council and successfully pass a fitness and competency review by the NY State Department of Health (DOH) prior to receiving a certificate of operating authority from the DOH.
- ▶ A Municipal Certificate of Need, herein after referred to as a Muni-CON, was originally enacted in 1995 by the New York State Legislature to supersede the statutory process as a result of a municipality's desire to operate a municipal ambulance service. The municipality planned to task its Bureau of Fire to provide ambulance service within its boundaries. The municipality was unable to obtain Regional council approval and, as a result, the Legislature passed a State Law that created a municipal ambulance service for the City.

Municipal Certificate of Need and Operating Authority a Historical Perspective

- ▶ In 1996, the Legislature recognized that there were a significant number of municipalities in the State of New York with issues similar to the municipality referenced above and amended NYS PHL Article 30, creating municipal authority for any municipality to operate an ambulance service. Subsequent to this, the NYS DOH BEMS promulgated policy and procedure (originally Policy Statement 97-01 and subsequently Policy Statement 01-06) for Municipal CONs.

Important Definitions

- ▶ **Certificate of Need (CON)** is a process defined in NY State Public Health Law Article 30, [section 3005](#), whereby an entity wishing to operate an ambulance service makes application to its local Regional EMS Council (REMSCO) for a determination of public need, prior to NYS DOH BEMS granting of a certificate of operating authority
- ▶ **Muni-CON** is a process defined in NY State Public Health Law [Article 30, section 3008](#) (7-a), whereby a municipality, after passing local authority, establishes an ambulance service.
- ▶ **"Public Need"** is defined by [Article 30](#) of the New York State Public Health Law, and [NYS DOH Policy Statement 06-06](#) as:
 - ▶ "The demonstrated absence, reduced availability or an inadequate level of care in ambulance or emergency medical service available to a geographic area which is not readily correctable through the reallocation or improvement of existing resources"
- ▶ A **"municipality"** is defined by Article 1 of the New York State General Municipal Law as:
 - ▶ "A county, town, city or village OR a fire district acting with the authority of or on behalf of such a municipality"
- ▶ A **"municipal governing body"** is defined by Article 1 of the NY State General Municipal Law. It identifies a "Municipal Corporation" as:
 - ▶ "... a county, town, city, or village under the control of a governing board of such organizations, including a board of supervisors of a county, the town board of a town, the common council of a city, and the board of a trustees of a village.

Important Definitions

- ▶ **"Primary Area of Operating Authority"** is defined by [Article 30](#) of the New York State Public Health Law as:
 - ▶ "...the geographic area or subdivisions listed on an ambulance service certificate or statement of registration within which the ambulance service may receive patients for transport".
- ▶ **"Ambulance Service"** is defined by [Article 30](#) of the New York State Public Health Law as:
 - ▶ "an individual, partnership, association, corporation, municipality or any legal or public entity or subdivision thereof engaged in providing emergency medical care and transportation of sick or injured persons by motor vehicle, aircraft or other forms of transportation to, from, or between hospitals or other health care facilities".
- ▶ **"Advanced Life Support First Response Service" or "ALS-FR"** is defined by [Article 30](#) of the New York State Public Health Law as:
 - ▶ "an organization that provides advanced level support care but does not transport patients"