

Warren County EMS

The state of our system and how we can help.



Micki Guy

- Warren County EMS Coordinator

- Regional Council Chair
- Paramedic with Lake George EMS
- FF / Paramedic with City of Glens Falls FD
- EMS Instructor
- EMS Billing Coder and EPCR Trainer for Emergency Management Resources

Patrick Mellon

- Warren County Deputy EMS Coordinator

- Captain at Colonie EMS
- Fire Chief at Bay Ridge Volunteer Fire Company
- Paramedic with Luzerne EMS / Lake George EMS
- Instructor

Travis Howe

- Warren County Deputy EMS Coordinator

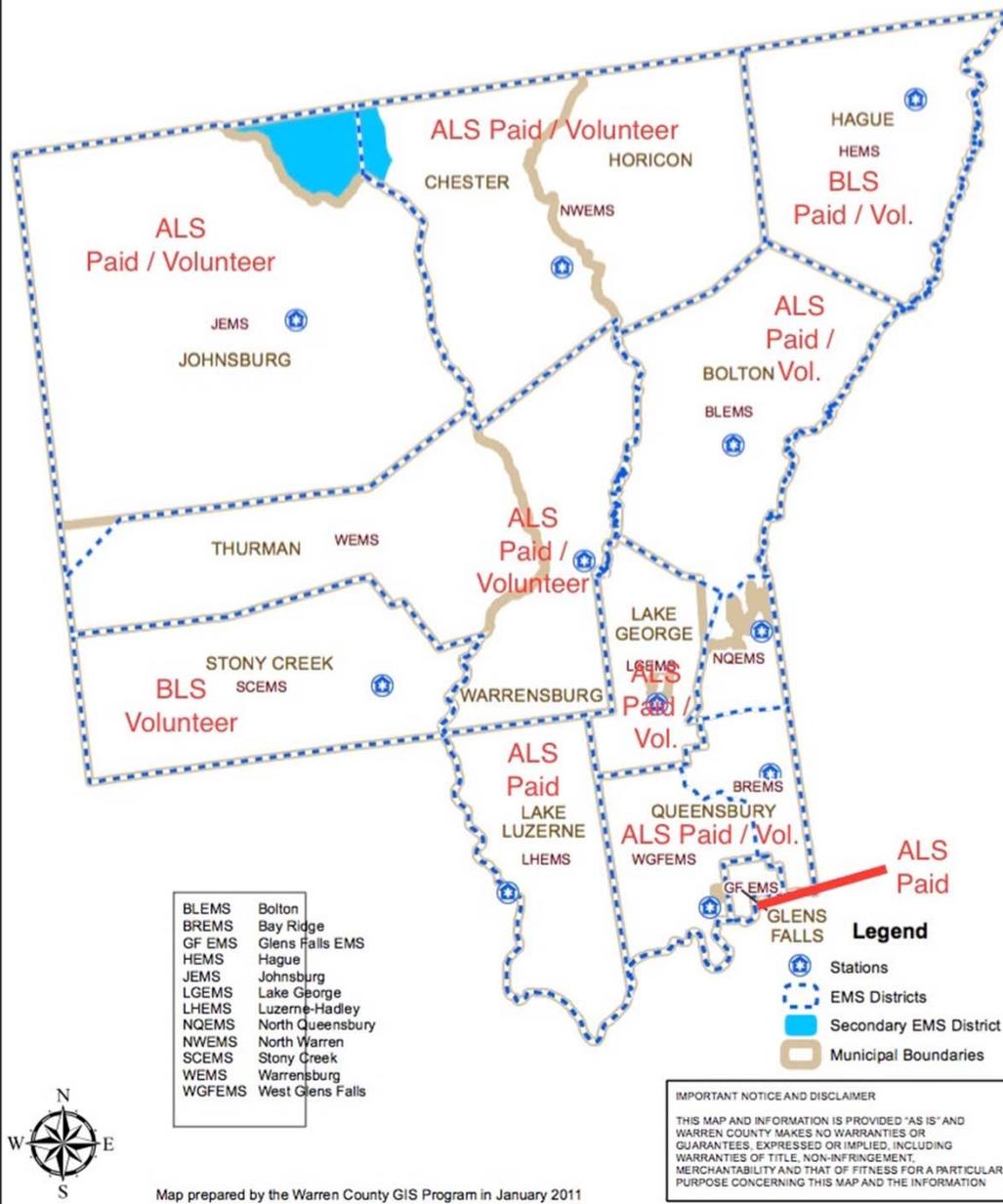
- EMT at E5 Support Services and Warrensburg EMS
- Executive Director of Mountain Lakes Regional EMS Council
- Course Sponsor Administrator for Mountain Lakes
- EMS Instructor

** Speaking from position within County*

** Coordinators were asked to look into issues and solutions*

** Have spent many hours investigating other EMS systems, such as Albany County, Greene County and Livingston County*

WARREN COUNTY EMS DISTRICTS

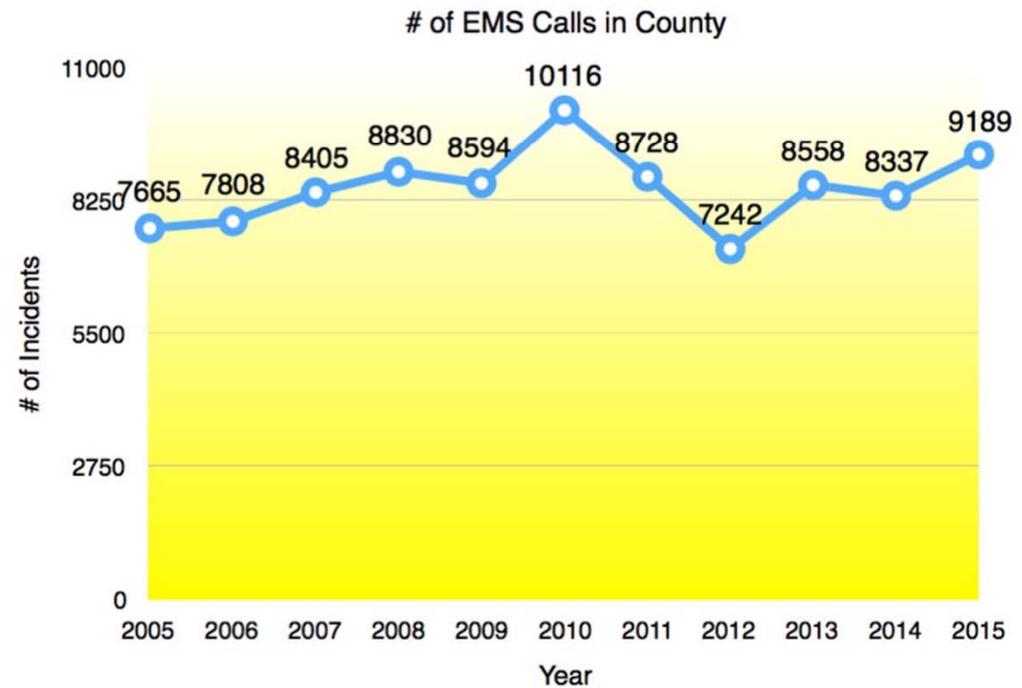


- 12 ambulances staffed on any given day
- Typically two providers per ambulance



Table 1

Year	# of EMS Calls
2005	7665
2006	7808
2007	8405
2008	8830
2009	8594
2010	10116
2011	8728
2012	7242
2013	8558
2014	8337
2015	9189



*** Does not include Glens Falls Fire's EMS Calls (1,950 in 2015)**

*** Direct correlation to population**

Agency Owned Vehicles in Service

Bay Ridge - 2 ALS Ambulances

Bolton - 2 ALS Ambulances

Glens Falls - 2 ALS Ambulances, 1 Reserve Ambulance

Hague - 2 BLS Ambulances

Johnsburg - 3 ALS Ambulances

Lake George - 2 ALS Ambulances, 1 ALS Fly Car

Luzerne - 2 ALS Ambulances

North Queensbury - 2 ALS Ambulances, 1 ALS Fly Car

North Warren - 3 ALS Ambulances

Stony Creek - 1 BLS Ambulance

Warrensburg - 3 ALS Ambulances

West Glens Falls - 3 ALS Ambulances, 1 ALS Fly Car

ALS Ambulances - 26

BLS Ambulances - 4

ALS Fly Cars - 3



ALS Providers / Staffing

Total Number of Providers by Level and County for (Based on County of Residence)

County	CFR		EMT		Advanced EMT		AEMT-CC		EMT-P		Total
Clinton	7	0.0%	202	65.8%	3	1.0%	87	28.3%	8	2.6%	307
Essex	4	1.9%	159	74.0%	5	2.3%	37	17.2%	10	4.7%	215
Franklin	2	0.9%	162	75.0%	5	2.3%	37	17.1%	10	4.6%	216
Warren	3	1.1%	192	71.1%	1	0.4%	41	15.2%	33	12.2%	270
Washington	19	8.7%	139	63.5%	7	3.2%	39	17.8%	15	6.8%	219
Total	35		854		21		241		76		705

EMT - 192

AEMT - 1

Critical Care - 41

Paramedic - 33

Total ALS Providers - 75

- Not all of the 75 ALS providers are active.
- Some of the 75 ALS providers have primary work in Capital District.
- 338 ALS providers in region but only 306 are active - down from 368 in 2010.
- **7 of the 75 ALS Providers are Volunteer only. 93% are Paid.**

A Hurting EMS System

- 1. Steady decrease in volunteerism.**
- 2. Steady increase in paid shifts with a simultaneous decrease in providers, regardless of paid or volunteer status.**
- 3. Lack of leadership in areas.**
- 4. Second and third calls and weekend coverage.**
- 6. Finances - EMS can't control supply and demand like a traditional business. We can only control our resources and how they are used.**
- 7. Burnout! It is typical for our EMS providers, to work at multiple agencies and put in long hours. Some work 48 to 72 hours per week to provide for their families. The majority do not have access to benefits and do not make enough money to retire.**
- 8. Our young people are leaving for work in municipal services in the southeastern US. We can not compete until we have something more to offer.**

How Can We Collaborate and Help?

- **Pass a resolution to allow the County to become an EMS agency. This is a quick process and can be managed through the Office of Emergency Services.**
- **Utilize the current EMS Coordinators for coverage and administrative duties and hire per diem help.**
- **Operate 1 ALS fly car on an as needed basis or per agency agreements and 1 ALS ambulance 24/7/365. This will immediately mitigate any fallout from unstable agencies and others with schedule gaps and second calls.**
- **This model would be the most efficient measure to assist agencies. It can easily expand as needed. A similar program was started by Livingston County several years ago as a support network for existing agencies and it steadily grew over time.**
- **Financially support agencies that can't sustain volunteer staffing.**
- **A County EMS agency would allow for us to focus on specialty response with WCSD, Hazmat and Marine Rescue Teams.**
- **Support initiative to start a paramedic program in the region. This will begin in 2017 and we must be prepared to recruit / retain.**

Longterm Goals

- **Better utilization of resources. All of our ALS agencies currently staff and equip themselves to the same level, regardless of seasonal populations changes, call volume and geography. They are unable to share an ALS provider or conduct other initiatives due to state policy and billing regulations. There is real opportunity to save money through better resource management under a county umbrella.**
- **Agreements and collaboration could lead to immense purchasing power and savings.**
- **Standardization of resources and the ability to bulk order and replace large ticket items, such as ambulances and cardiac monitors.**

Approximate Initial Costs & Considerations

- **Ambulance Operating Authority / Municipal Certificate of Need - \$0**
- **1 Fly Car - TBD based on used, new, what is in current county fleet.**
- **1 Ambulance - TBD based on used, new, what is in current county fleet and agreements with exiting agencies.**
- **Initial ALS and BLS supplies, medications and equipment - TBD**
- **Cardiac Monitors, ventilators and other advanced equipment - TBD based on new, refurbished, and agreements with existing agencies.**
- **Salaries and Fringe Benefits - TBD**
- **Medical Director - TBD**
- **Billing revenue will help to offset costs. This process involves the use of an outside vendor due to the immense man-hours and regulatory issues involved. Billing companies typically charge a percentage of how much money is collected.**
- **We should start small and focus on assisting current agencies.**



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EMS Abbreviations and Lingo

AEMT - Advanced Emergency Medical Technician

ALS - Advanced Life Support

BLS - Basic Life Support

CCT - Critical Care Technician

CFR - Certified First Responder

EMT - Emergency Medical Technician

Medical Director – Emergency physician who oversees patient care.

NYS DOH BEMS - New York State Department of Health Bureau of EMS

Rig / Bus - Ambulance