EMSTF

November 29, 2017

Present: D. Keefe, D. Kline, L. Shurtleff, P. Brunner, R. Sparks, I. Weiser, B. Wilbur, B. Gilligan, B. Goodman., L. Holmes, M. Lynch   
CIPA: Prof. A. George, S. McCarthy  
Staff: A. Edwards

The meeting was opened at 5:09 pm- an audio recording of the meeting is attached\*  
**Updates**  
**Prof. George**-Spoke with Cornell EMS. Run completely by students. 68 people-10 administrative, 10 clinical who help train students- only 6 are crew chiefs- some are not certified or not trained well enough. It takes a long time to train these students- many get training at home and some train through the fire academy and/or TC3. They take people based on having community interest and those who know what they are getting into. Some don’t want to go with the CEMS because they want more action. Cornell EMS would be happy to meet with us. They have information sessions for new recruits twice a year, we could send someone to one of the sessions to give broader interest for students who may want to be more heavily involved in one of the County’s services. Professor George will be in touch with Cornell EMS again.  
**Doug K.-** Central recruiting- Doug put a link on Tompkins County EMS Fire Chief’s Association web site-   
**Patrick B**.- TC3 recruiting handed out a lot of applications; 20-25 kids; Dryden ambulance wanted Patrick to mention that volunteers can drive an ambulance- need weekends; Chiefs meeting proposal- not everyone is on board.  
**Lee S.-** County appointment of Paula Younger as interim Administrator- - she is aware of our efforts and will be at the next meeting. County budget passed for funding   
**Irene W**.- several municipalities that have agreed to give us money; contingent after towns see a report and recommendations  
**Dan. K**- Each town giving $5000 and the County giving $25,000 will equal around $55,000  
Irene- appreciative of the students efforts  
**Bill Gilligan**- BOFC ends in December and not sure that means for Bill’s and Bob’s participation in the task force.  
**Bob Sparks**- dispatching changes- IFD not to be first responding agency for some calls  
**Lee S.**- City not on first alarm assignment outside area- implications on overtime; pressure to maintain coverage in respective areas.   
**Lisa H**.- Human Services providers are reviving a falls prevention effort; Spoke with an Administrator from assisted living center known for fall related calls- Lisa received a letter from an assisted living resident complaining about a bill for ambulance, thought it was unnecessary, but policy- NYS law regulations- wanted a copy of said law. In law, facilities are responsible for making sure a patient’s emergency needs are taken care of; doesn’t say that their staff provide that care. Facilities are worried about liability.

**Informational Discussion**- Lee Shurtleff- ***\*00:35:02***  
Fire Department organization structures-  
The group wanted to better understand the structures are that provide services, where local governments fall into it, and definitions of Departments and Districts. Who is responsible for what?  
Organizational Structures- Fire Department- this is important because fire organizations in the county is providing some level of emergency medical services- core groups that have traditionally done so. Different way they are organized determines who is authority of jurisdiction and who has responsibility for funding them and who makes the decision on level of service. Fire Companies- organization develops fire fighters find single companies, or multiple companies. Earliest fire departments in Tompkins County and across the state were organized in villages. Created village government to create a taxing authority to fund the provision of fire services. Forming these departments, they incorporated volunteer fire companies and often time companies were formed to provide a very certain purpose- ladder companies, hose companies, engine companies, different functions as part of a broader response. As municipal laws developed, primarily villages and cities were given authority if not a mandate to provide fire services within municipal borders. In 1940’s, other companies organized and provided services in unincorporated townships and larger rural areas. Groton as example, fire departments rarely left the confines of the village before then. They established a working relationship with the town and a contract so they could go beyond the borders of the village and have the insurance protection. Companies sprang up and started providing services into the lesser populated areas. Today, we’ve got 5 village departments, T-burg Cayuga Heights Freeville Groton Dryden and City, their primary response is within those municipal borders but contract out with adjacent townships to provide services on an extended basis. When you move to the Town level, the towns can organize and provided services through Fire Protection District or Fire District. Many cases across the state have formed a governmental body being a Fire District with the blessing with a resolution of local town board. Lansing is a fire district, Town of Danby is a fire district, Brooktondale, an area within the town of Caroline, is a fire district, as is Slaterville. Important to know these are wholly contained within a township border. Town of Caroline gave permission to Slaterville District to form, Brooktondale, and so on. 1970’s fire district form in Mclain area that crosses the town lines, took a joint resolution between towns of Dryden and Groton to create that district. In forming those fire districts, they become governmental bodies, they are considered a municipal government, except for a very limited purpose. They have in each of these areas an elected board of fire commissioners who have ultimate control over the department. These commissioners levy a tax to support the fire district activities. A fire district must exist to provide fire service to a complete town, or partial part or a joint village and town district. A town government does not have a fire district or a village, such as Enfield, newfield, part of the town of Caroline, Speedsville, Etna, and Varna. Created as Fire Protection Districts, are under Town Board, town can levy a fire tax outside of the corporate area, town of Ithaca has a fire protection district and levies a tax and contract with the city to provide service. Town of Newfield and Enfield have fire protection district and levy a tax across their entire township and then contract with independently incorporated fire company that’s within their borders, to cover certain part of the town. Dryden, their fire protection district is all the town area outside of the villages and the McLain fire district, they levy a tax within the town. Either you are a city department, village, or independent company contracting with a township, or a formally organized fire district with a board of commissioners that levies the tax and has overall control over the organization that provides the service.  
EMS part, fire departments, at one time or another, provided some level of Emergency medical services. The ems services were actually ambulance services operated by independent companies, or state regulations came about in the late 60’s a lot of these operators were unable to meet requirements. EMS moved to fire department that had an organizational structure and capable of running in an emergency mode. Towns would levy at tax or incorporate into their budget under public health considerations create a line item and they would fund a contract with the local fire department to add that service. They let commercial services operate. 1970’s all of fire departments opted to become first responders in addition to those operating services. Funding for that may had come into as part of their contract or free gratis, were here, we have the equipment, were going to provide the service and we’ve got the volunteers. So, since the mid 70’s all of the fire departments have provided some level of EMS.   
Lee assumes there was a resolution; if it was a company it may have been incorporated into a contract (very vaguely defined). The contracts wouldn’t say anything other than it is expected you are to respond to emergency calls in your area. The districts become a separate entity with no oversight by the town. The town formed by resolution and appointment board of commissioners or they were formed through a petitioning process of the property owners within the area. Mclain, percentage of taxable property that signed a petition in 1974 that said we want to form a fire district and by resolution the towns of Groton and Dryden consented to having that district form. At that point, it became and independent taxing authority with its own capabilities to set a tax rate and to set their own policies on how they will operate. Anywhere else where a town contracted with the fire protection district with another they simply contract and may determine a level of service through a agreement but have no authority to run the department. The district owns the equipment and if a district dissolves, then the equipment goes back to the municipality. Companies operate the districts equipment. The companies may buy their own equipment, but it becomes property of the district because they are insuring it.  
Where does EMS fall into this? There are different ways of providing the service. General Municipal law is what gives fire departments the authority to provide ambulance or medical service within their areas. Any fire department or any village, city or fire district operating a fire department or fire company can decide under the law that it wants to provide emergency medical services. In addition, there is a provision within general 122B which allows any town, village, city, or fire district to also create its own EMS service within the constraints of the states CON process. It becomes a case of who the operator is whether you are organized under general municipal law 209b which is in the fire department structure, or whether it’s under 122b, which it falls under the local government structure. That’s where we get into questions about where your operating territory is and who can bill for the service. General Municipal law enables fire departments and municipalities to provide ems services within their organizations.   
The process of Certificate of Need began in the 1970’s. The state started certifying Advanced life support with either a transport or first response level. They also starting certifying ambulance transport services. Anybody that was operating in a particular area in the 1970’s, was granted a certificate for their primary response area. It was written very vaguely. Serves on the Central NY EMS Council and every month they are continually correcting these certificates with language or descriptions that goes back to the 60’s and 70’s. He finds the council clarifying where the territory is. From time to time, there will be a dispute about who was providing this service back then, and whether the service is legitimately there. Had a situation with the town of Virgil when the Dryden wanted to formalize their contract with them. They were being challenged by the commercial operator out of Cortland saying they never had authority to go there. They sat down and went through Perkins ambulance records that showed they routinely responded to Virgil before they turned the service over to the Dryden fire department in the 1970’s. So the certificates are based on a historic response area. There is a limit on a number or certificates that the State will provide for ALS or for Ambulance transport services. If a new service wanted to be creates, you would have to prove a need to the Regional Medical Emergency Services Council and also the State Health Department in order to allow you to form the ambulance service. Same as Certificate of Need process that you would go through to form a health care based system. If you are nursing home, hospital, certain type of care facility, you need to have a cert of need to provide service. Economically you can fund only so many services/not enough need to support multiple levels. Everyone who operates an ambulance and advanced life support holds a certificate. Who can hold a certificate of need? Any municipality can be in EMS or ambulance, or through 209b they can authorize their local fire department, which is historically what we do in Tompkins County. Interestingly the county is not authorized to provide fire service, except through a very limited definition. You can have crash fire rescue for airport, but only for aircraft fires and not anything structural on the property. The County to go to EMS they need to get certified and a determination of public need at some point and time. If the county wanted to be an ALS first response service, you could establish under a municipal process under a two-year presumption of need, but ultimately would have to go to a Regional Council and be approved to provide ALS or ambulance transport. IF town of Newfield decided they want a local ambulance service, they could form one as a town body and then contract out or have their own squad, but would have to prove a need to the State past the first two years. There is ability for local governments. Demonstrated need, whoever is providing the need is inconsistent, non-existence, doesn’t meet the standards that the local town desires, and therefore that creates a need for other service to be created or expanded.  
Towns can create ambulance district. Instead of funding an EMS service through their general town budget, they can create a formal ambulance district, and the town board becomes the district commissioner, and they can levy a separate tax line on their bill. Ulysses and Dryden levy a tax within their townships as a separate line on their budget, in addition to their fire protection tax, and their own town tax. They take tax money and use it to contract with the village or with the independent ambulance company within the authority of their district; they can also bill the patients for service. So, they have different models of creating revenue. The point- you can have a local certificate of need, contract for the service, and in some cases the town, to fund the ambulance service budget and appropriation within their general budget, and within other cases those towns actually form a formal ambulance district so they can levy a tax and have the authority as town government to do revenue recovery in billings to the patients, which then comes to the towns and is subtracted from their contract each year.   
Other part is in no cases here do the towns operate the EMS service, they contract for it. Ultimately, which ever corporation is running that EMS service has the control over the operation and authority over the members. One more step, leads into Brian’s topic, who is employed and how are they considered, who are they employed with when they are a volunteer? Under NYS law we have set up for us volunteer fire fighters benefit law and volunteers’ ambulance workers benefit law. In the definition, volunteer firefighters are employees of the municipality where their company is located. So, if I’m a member of the Groton fire department, which is a village fire department that contracts with the town, I’m considered an employee of the village of Groton for worker’s comp coverage. If I get hurt either on an ambulance call or fire call, in the volunteer firefighter, y coverage comes from the village of Groton. Now if you’re in Speedsville fire protection district, contracting with the town of Caroline, considered an employee of the town of Caroline. Separately, the Brooktondale fire district, as a governmental body, they are the employer of the Brooktondale fire fighters, if they get hurt they are employees of the fire district. Town of Dryden, this is where the difference is with fire department, fire company, and the volunteer ambulance company, you have official Dryden firefighters they are covered by the village of Dryden as an employee. If they are also volunteering as a member of Dryden ambulance incorporated, they are responding on a town wide basis as a member of a separate corporation, which is housed in the same building, the town of Dryden is their employer. This is where it gets tricky who has authority. Operationally they work under whatever that authority having jurisdiction is, when it comes to mutual aid, it’s a whole other matter as to how insurance works. If I’m in Groton on the Groton ambulance and I respond to Dryden, and I get hurt, my workers comp carries over. If I wreck the fire truck or ambulance and help was requested from another town, then the town that requested is responsible for the accident. When you get into EMS, you need to look at the organizational, funding structure, and state medical authority they are granting you to provide within your territory. Regional medical advisory committees, medical director who grant privileges. One aspect of moving ahead, may be engaging an attorney who specializes in emergency services law. (Lee put this information together from fire service laws from numerous State laws in different sections)  
  
**Informational Discussion**-Brian Wilbur- \****01:23:30***   
AHJ -Authority having jurisdiction-An organization, office, or individual responsible for enforcing the requirements of a code or standard; or for approving equipment materials and installation or a procedure code enforcement. IreBrian cut his discussion short due to time constraints-he will send information on this topic and may be adding as a topic at a future meeting.  
  
Stephen McCarthy will send out CIPA final presentation the Friday before next meeting.   
\* <https://www.dropbox.com/s/n9996h0qlofj7z5/WS500295.WMA?dl=0>

Dismissed 6:50 pm

**Next meeting:** Monday, December 11th 6:00pm-8:00pm