



GREENE COUNTY AMBULANCE REVIEW STUDY

Wednesday, March 12, 2025 at 6:00 p.m.
Greene County Emergency Services
Meeting No. 4 Agenda

During February, we met with existing EMS staff including municipal members, Greene EMS members and a not-for-profit ambulance service. The meetings were well attended, and considerable discussion and debate was held. A synopsis of our meetings with existing EMS staff is summarized below.

If there is one single issue that was repeatedly made by the existing staff, it is that current staff levels are too low at the present time to make any change in operations, although, that doesn't mean a change in organizational ownership can't be implemented. The EMS staff made recommendations on what a new system can be, however, the recurring theme was a shortage of staff, and that employee recruitment must be Priority #1.

Synopsis and Current Observations and Opinions of Existing EMS Staff (Points 1 – 3)

1. Goals, Objectives and Observations of Current EMT & Paramedic Staff

- a. Any System's Change Must Remain Focused on Patient Care
- b. Fly Car Deployment Is Not Broken Or A System Problem
 - i. The transition to the new system should consider continuation of the same until staffing levels increase, thereby allowing reconsideration
- c. The BLS System is the Current Operational Problem
- d. Excessive Work Hours are Associated with Inadequate Salary and Benefits
- e. Employee Training and Professional Development are Inconsistent Among Current Agencies
- f. Equipment and Supplies are Inconsistent Among Current Agencies
- g. Multiple Independent Agencies Allow Shift Jumping
- h. Travel Time To/From Hospitals is Often Cause of Strain on System Due To ER Diversion
- i. Employee Recruitment and Retention Must Be Focused Re: Any System's Change
- j. Current Employee Shift Scheduling Should Be Maintained
- k. Long-term Operational Goal Should Consider Having 12 Ambulances On Day Shift and 9 Ambulances On Overnight Shift. Additional Review Should Be Considered for Seasonal Demands i.e. Ski Season Or Other Unique Tourist Activity

2. Recommendations From Current EMT and Paramedic Staff

- a. During Any Transition To a New System, Should Maintain Fly Car Operations
- b. Faze Out Of Fly Car Operations Should Only Be Considered If Appropriate Fleet Deployment Can Maintain Adequate Response
- c. Employee Recruitment Must Commence Immediately With The Following Criteria:
 - i. Build our own: create an EMT Trainee position and provide paid certification
 - ii. Create a career path mechanism of advancement and employee retention
 - iii. Equalize and provide continuous training, education, and quality review programs
 - iv. Determine shift work hour thresholds and define appropriate overtime maximums
- d. Evaluate Salary and Benefit Systems To Attract and Maintain Workforce
 - i. The salary system should include defined hours of operation, PTO, medical coverage, municipal retirement system membership, shift differentials among other benefits
- e. Define Career Path Opportunities Within the County Civil Service System
- f. Define Front Line Service Titles and Administrative Service Titles
- g. Territories Or Coverage Areas Are Not Recommended
 - i. The countywide system should allow continuous movement of fleet as per protocols
 - ii. It is not recommended to create Mountain Top, Valley, Riverside geographic response territories
- h. Recognition That Reorganization May Cause Fallout Of Some Existing Employees

3. New System Orientations

- a. Acknowledgment That Current Staffing Levels Will Not Provide Recommended 12 Ambulance Fleet Deployments
- b. Maintain Existing Fly Car System Until Employment Numbers Improve, Then Reevaluate
- c. Determine Date Of Transition and Determine a “Go Live Date”
- d. Design Transition Strategy To Geographically Combine Current Agencies Under a Single Operational Umbrella. Set a Specific Start Date and Completion Date
- e. Transition Schedules Should Include a “Hold Harmless” Clause Protecting Tenure Status
- f. Set Up Recruitment Programs That Include Paid Training/Certifications (Build Our Own)
- g. Create Consistent System Protocols For Employee Training, Fleet Deployment, Medical Equipment, Medical Supplies, Wages and Benefits

4. Operational Considerations Outside of Employee Recommendations

- a. Finances
 - i. How to finance a consolidated system?
 - ii. Best practices for invoicing insurance, Medicaid, Medicare, NYS Department of Corrections, festivals and other
 - iii. Status of current town budget commitments
 - iv. Possibility of unified countywide taxing jurisdiction
 - v. Individual town independence decision
 - vi. Impact of NYS Tax Cap calculations and Override prospects
 - vii. Status of current owned assets and transfer thereof
- b. Creation of Medical Ambulance Transportation Board of Directors
 - i. Recruitment of management staff
 - ii. Status of existing CON's and expiration thereof
- c. Operational Considerations
 - i. Transports from hospitals to other locations (nursing homes)
 - ii. Inmate transports
 - iii. Prospects of "Community Medicine Practice"
- d. Status of Other Existing Town Owned Assets and Liabilities
 - i. Fleet, any current ambulance orders or functional obsolescence
 - ii. Buildings, garages,
 - iii. Medical equipment
 - iv. Leases, loans, bonds
 - v. Depreciation values
 - vi. Employee 401k programs
 - vii. Employee time banks

5. Next Steps

- a. Community Buy-In
 - i. Community Outreach and Communications
 - ii. This potential system consolidation must be understood and embraced
- b. Town Board Acceptance
- c. County Legislature Acceptance
- d. FY 2026 Budget Formulations, Property Tax Implications
 - i. Draft budgets need to be made
- e. Understanding Unionization of Workforce and Complications
- f. Let's Decide
 - i. Any decision will most likely need amendments and flexibility as design meets reality
 - ii. Not everyone may embrace recommendations
 - iii. Not all current employees may wish to join the new organization
 - iv. Patient care remains Goal # 1
 - v. Response time is a significant issue among all parties