

Greene County Ambulance Review Study Meeting No. 4

Minutes Summary

Wednesday, March 12, 2025, 6:00 P.M.

Greene County 911 Center, 25 Volunteer Drive, Cairo, NY

Greene County EMS Evaluation Committee Membership, Ambulance Policy Group, EMT's, Paramedics, Greene County Legislature, Media, Staff, Members of the Public:

Steven Near, Beau Dushane, Gerard Laird, Davia Montie, George June, Nadine Myrdycz, Mark Evans, Sean Hotaling, Jim DiPerna, Neil Kellegher, Shaun S. Groden, Patrick S. Linger, Matthew Luvera, Harry Lennon, Charles Martinez, Patricia Handel, James Thorington, Greg Davis, Richard E. Tompkins, Patrick McCulloch, John Bensen, Sean Mahoney, Thomas Hoyt, Michael Bulich, Jay Lucas, Daryl Legg, Sherry B. True, James O'Connell, Michael D. Lanuto, Jr., Michael Pirrone, Michael Ryan, Roger Hannigan-Gilson, John P. Farrell, Jr., Paul Macko, Raymond Ward, Ariel Woolheater, Jennifer Moore-Warren, Brian Turley, Aiden S. O'Connor, Jr., Philip Myers, Kevin Forbes, Tanya Ernst

Synopsis:

New binder materials were picked up by attendees upon entering the meeting. Mr. Groden reviewed each of the binder materials including the following: Summary of Meeting Minutes – December 11, 2204, Greene County Ambulance Review Study Meeting No. 3, Attendance Sheet, Rethinking Emergency Medical Services: Applying Evidence and Data to Redesign Response Models for a Resilient and Sustainable Future, Greenport Rescue Squad, Inc. – Impact Report 2024, Fleet Inventory Data Sheet Questionnaire, Equipment Inventory Data Sheet Questionnaire, Facility Data Sheet Questionnaire, Meeting No. 4 Agenda.

Mr. Groden gave an overview of the two meetings with EMT's and Paramedics and stated that the meetings were engaging and the contributions that were made were invaluable. Mr. Groden highlighted each of the bullet points on the evening's agenda, pointing out that the fly car system is working and that the BLS system is in danger. There will be an evaluation as to whether the fly car and BLS systems will be combined in the future. Mr. Groden touched upon the extensive work hours and the fatigue and burn-out factors that EMT's and Paramedics face; they don't like the long hours but do it for the pay. There was concern that there is great inconsistency with EMT training, quality review, and equipment and supplies. With multiple agencies, there is shift jumping which Mr. Groden would like to see more control over. Diversion is an issue with delays of rigs sitting in parking lots. From an employee standpoint, recruitment and retention is a concern. Mr. Groden believes consolidation would solve that with a new pay scale. The long-term goal of EMT's and Paramedics is that the system needs a twelve-rig system dayshift and a nine or ten rig nightshift. We can't go to a twelve-rig system because we don't have the employees; an Achilles

heel in each scenario. The goal is to build our own system through hiring and training, advanced training and continuing education. Mr. Groden questions whether the fly car system will be phased out or combined with BLS, reemphasizing that the fly car system is not broken. With a larger organization and the resulting career path opportunities, recruitment and retention issues may be resolved; training would be consistent; staffing would involve Civil Service positions with titles. Mr. Groden recognizes the possibility that current employees may not stay and the potential fallout. The current roster may be discounted by a factor of ten percent either as the result of losing employees to another county or by using them in other roles. It will also be necessary to have extra staff to backfill for vacations and paid time off.

Mr. Groden discussed that the combined town contribution from town budgets is approximately \$4.6 million; the County puts in \$2.5 million; and there's \$2 million worth of invoicing. Current assets that are owned by multiple agencies would have a depreciation schedule; the purpose of the questionnaires was to assess what is in place, its lifecycle and its functional obsolescence. He questioned how it will be financed and stated that the question put to the towns previously was, 'Are you in?' which couldn't be answered because of all the unknowns. He asked that, if it is assumed that all personnel come under one umbrella and that the towns get out of the ambulance business, what happens to the town's contribution that was previously made to the system? With a special district, primarily financed by the County, we would not be able to exclude that cost being applied to the towns' assessed valuations. With a special district, the towns that didn't want to join could be carved out. Are you going to join us or stay independent? Is there going to be a board of directors or an industry that will have more say in day-to-day operations but budgets still come to the County Legislature. My board would then be phased with taking money that's not budgeted this year, accelerating some transfer and some transition to leadership and hiring the employees who would be in the 'back of the house'. Once defined, there would be a public presentation to explain to the community the reason why and how it will be done, when it will be implemented, and the impact on the County or on the towns and villages. Town and County board acceptance will be necessary. Mr. Groden explained that he will go through a budget formula that takes into consideration the absorption of the wage scale increase of existing staff and the transfer in healthcare and retirement benefits and that there will be discussion regarding the number of full-time and part-time employees that will be necessary; it will be our responsibility to put a budget projection together and decide how it will be met. Mr. Groden turned the meeting over to the Chairman of the Greene County Legislature, Patrick S. Linger.

Chairman Linger asked to hear from some of the Administrators who met with Mr. Groden as to whether Greene County is on the right track for what will work with a countywide system. Nadine Myrdycz and Davia Monte both felt that there was a positive outcome but questioned how to fill the void with the lack of providers in the County.

Chairman Linger stated that when the Fitch study was done and the budget numbers are run, that the County is looking at this as a countywide system from both the perspective of revenue and expenses. All-in is the way to go and is the only thing that maintains the work already done and

captures most of the costs. On the revenue side of things, there is an idea of what the towns currently spend, however, the way they each get their revenue lacks consistency. Bringing everything under one system with one accounts receivable, we will increase revenue, or we'll get a little better percentage on the return side, which then should maintain controllable costs and contribute a little more to the system.

Legislator Legg asked why not have territories instead of a general system. It was explained by Steve Near that it would end up necessitating additional steps; consolidating all agencies under one umbrella would give the ability to move units; with more units, the response times go down.

Mr. Groden mentioned community medicine, another industry change that may be coming and would help with finances as a qualified agency could pick up some of the work that's currently being done at hospitals and asked Mark Evans for his perspective.

Mr. Evans was encouraged by the two meetings with EMT's and Paramedics and felt that they were the two best EMS meetings he had ever attended and produced what would be needed for the County as a model. Having Paramedics and EMT's answer calls is one component of it. The billing system needs to be effective with a huge budget and the information necessary which has posed problems with agencies leaving money on the table. Currently, 911 dispatches with a police car, a fire department, a paramedic, and an ambulance. Many calls do not need that level of response. One discussion in the two meetings was to use other resources to reduce the number of calls involving an ambulance and paramedic.

Legislator Legg asked how to reduce unnecessary transport and if the person can be denied transport. The answer was that when the ambulance service is called then the person must be taken to the hospital. Steve Near explained that there's legislation now for 'treat in place' for submission for reimbursement.

Sean Mahoney mentioned the concern that there are staff that would prefer not to be assigned to a location in a countywide system that would not be convenient for them to get to work. Paramedics and EMT's did not believe that this would be a problem, however, Mr. Groden was confident that there would not be just one hub that everyone begins at. There will be geography involved but the cars will move. Union collective bargaining agreements will dictate the assignment of shifts. Tenure will always be a driver, but the contract will decide.

Mr. Hoyt asked if there will be a backstop built within the system so that the last ambulance in the rural area of the County doesn't get pulled out where there is no backup plan. Chairman Linger explained that dispatch will see that happening and will reach out to mutual aid to get someone in so that there's a backstop. Mr. Groden stated that having on-call staff is common in a collective bargaining agreement.

Sean Mahoney discussed full-time and part-time EMT's and what the expectation of what the tiers of compensation will be and hopes that those tiers of compensation will attract the part-time people to enhance the current workforce with pay and benefits. He believes that getting a gauge as to

whether the staff will embrace a countywide system is important. Mr. Groden stated that there will be defined titles with hourly rates that will be run to create a budget. In the past, when a new union was formed, multiple agencies desired to represent the group, and it took three years for PERB to make the decision as to which was the proper union. Compensation could not be changed at that time because it would be viewed as a bad practice; outside the parameters of the collective bargaining agreement. With the possibility of stagnation, I would probably have an even higher starting pay under the assumption that it may get tied up for two years during which time, I can't give a raise unless I want to violate the rules of bargaining. Mr. Mahoney stated that there are a number of providers playing the agency game and are able to make a good living as a result; the ability to play the agency game will go away and he wonders how to keep those providers engaged in the industry. Mr. Groden responded that by defining a maximum number of hours to be worked, including overtime hours, and, if that still doesn't meet their lifestyle, they will leave. Not everybody will be happy and some will leave. Mark Evans stated that he does not have a problem with recruitment and gets top students; when recruits see the level of commitment by Greene EMS board and staff, the towns and the County, and see what they have on the road, they put in an application to work. They want to work here and don't care where they live. They consistently come from Cooperstown and there's no reason why that can't be rolled over to the BLS side as well.

Legislator Bulich asked about idle time and unnecessary ambulance transports. Jim DiPerna stated that the emergency medical dispatch protocols that have been used every day for the last eighteen years do have a very small subset of calls that, once dispatch has triaged the call, could be referred to something other than a transporting ambulance. Because there are no resources to refer them to, those calls get upgraded to an ambulance response in under ten percent of all calls.

Raymond Ward stated that to do a straight ad valorem levy, if the legislation does not allow a carve out, the County will have to distribute that within the County tax levy across the whole.

Mr. Groden stated that towns would have to rescind their special districts and give up their CON's so that there are no dry CON's. Sean Hotaling stated that Muni-CON's are quick to get.

There was further discussion regarding staff time banks, pay parity, breakdown of full-time and part-time employees, and how each of the towns ambulance assets would be managed.