

1. Excuse the extreme delay in getting these May 2016 notes out. You'll also have to endure my interpretative efforts of those who actually attended as I was elsewhere. While I'd rather have poked my eyes out, I watched the on-line videos of the meetings, gleaning what I could from the artful masterpieces. Special thanks to Carol Brandt of Mohawk Ambulance for her meticulous notes that captured behind the scenes information.
2. The 2016 EMS Memorial Service was held on May 17<sup>th</sup> at the Empire State Plaza, attended by one of the largest crowds in history. What a fitting and memorable tribute to our fallen brothers and sisters and their families and loved ones. The attendance sent a message to the many elected officials and families about the strength of the bond we all share. If you missed it, visit [www.youtube.com/watch?v=vPirfcgRLCY](http://www.youtube.com/watch?v=vPirfcgRLCY). Sadly, FDNY reports 1,000 of their members are currently ill from exposures sustained in the 9-1-1 attack.
3. PIER reported that 9 of the 18 Regional Councils submitted nominations for the annual NYS EMS awards (pretty pathetic). Ultimately, with some gentle encouragement (i.e., bashing over the head with a shovel), 15 regions sent in nominations. Awards will be presented at the Vital Signs Conference.
4. The Bureau announced a series of conference calls led by Council Chair Steve Kroll. The theme is business and financial stability of EMS services in a rapidly changing health care system. Calls were held in June and early July and will continue. Interested parties are welcome to join in:
  - July 26 at 2pm: Integration of EMS into the healthcare system
  - August 15 at 9am: Rural EMS
  - September 6 at noon: Patient-centered EMS
  - Others to be scheduled...Call in information is as follows: 518-549-0500 (or 844-633-8697), Code 19290245#
5. Check and Inject NY now spans all 18 Regions, 382 agencies, 2,000 kits distributed, 4,000 people trained and 11 uses as of May which is like 1 per week, dude. Google it: [www.google.com/?gws\\_rd=ssl#q=check+and+inject+ny](http://www.google.com/?gws_rd=ssl#q=check+and+inject+ny).
6. In what were incredibly calm Medical Standards and SEMAC meetings, the NYS Collaborative Protocols were approved. Some notes from the workgroup: some regions will print copies but the intent is to distribute an app that will allow real time updates; eMOLST is being added ("What, what, what?" you say. Go to [www.compassionandsupport.org/index.php/for\\_professionals/molst\\_training\\_center/emolst](http://www.compassionandsupport.org/index.php/for_professionals/molst_training_center/emolst)); roll out will involve different training in each region but much of the new content will be hosted on a University of Rochester LMS (that's learning management system); and while controversial, patellar reductions will be included. Here's why reducing patellar dislocations is important: the collaborative pain management protocols allow some pretty decent narcotic doses for painful orthopedic injuries. While patellar dislocations hurt like a mother, yet they are easily reduced – in fact, they often reduce just with patient movement. If you load a patient with a dislocated kneecap with narcotics to make them comfy and then reduce the dislocation: uh oh! Time to get out a BVM. Better to take a more logical approach and alleviate the pain.
7. Sad news for SEMAC and the STAC (State Trauma Advisory Council): Dr. Dan Bonville, a Trauma Surgeon from Albany Med who contributed greatly to both committees as well willing shared his expertise at QI meetings and conferences throughout NY, accepted a position in Houston. Many thanks for his dedication to advancing trauma care and EMS.

8. DHSES State Preparedness Training Center in Oriskany regularly offers active shooter, tactical EMS, remote location EMS, and EVOG training. A focus group has been established to assist in the development of relevant EMS training programs. In police work, this would be a clue: EMS attendance is not so good. Here’s their web site: [www.dhSES.ny.gov/sptc/](http://www.dhSES.ny.gov/sptc/).
9. Some changes to protocols and SEMAC Advisories: MAST Pants (BLS Protocol – page T-5), sentence 8 is changed from using MAST to splinting an unstable pelvis by applying a pelvic stabilizer device; the Hypoperfusion Protocol under Special Considerations #2 (SC-2) deletes Section V, essentially wiping MAST pants out of NYS Protocols. The SEMAC Advisory 97-04 on use of MAST is rescinded as is the 97-03 SEMAC Advisory on Hyperventilation in Severe TBI. Advisory 02-02 on AED for Pediatric Patients is also kyboshed. For all practical purposes, MAST is no longer in use. But wait! MAST remain in EMS Education documents, for what reason, no one knows. The pair you have in your ambulance is quite likely dry rotted and if you think you’re ever gonna get them to work, you may be delusional. Okay, after that word from our sponsor - lastly, a TAG has been established to review and update the alternative formulary, that document created during the era of drug shortages, allowing services to substitute medications when the protocol meds are not available or affordable.
10. DOH reports that PCR’s are not getting to hospitals. SHOCKING (not). Uh...what to say? These are important, especially to trauma centers where PCR’s are part of their certification process. Not like they’re unimportant otherwise...
11. A little budget item: the Health Commissioner is looking at whether Medicaid rates actually cover the cost of EMS services for a report to the legislature. I think we can all answer that question without much reflection. However, surveys sent to all 500 ambulance services with Medicaid Provider numbers resulted in 40 returns. That’s neither good nor helpful. The Bureau is updating their contact/email list in case that had some influence on the poor return rate. If you get an inquiry, it’s not spam.
12. Training and Education (T&E) reported exam results were reporting in an average of 12 – 14 days. Through May 2016, pass rates were:

Level	# tested	pass rate
CFR	1,419	92.8%
EMT	3,560	89.41%
AEMT	37	79.18%
CC	54	95.1%
P	558	88.61%

An item development workshop was held May 2-3, resulting in creation of 250 new test questions for the NYS written exams. Of course, they all need to be piloted. Additionally, the 4 hour course needed for CICs who qualify for certification taking the NAEMSE class (as opposed to the NYS CIC Course) can now be done on-line through the Moodle portal at [www.vitalsignsconference.com](http://www.vitalsignsconference.com). The first set of instructor (CLI & CIC) exams were administered May 19<sup>th</sup>. No word yet on pass rates.

13. An amendment is in the works to Policy Statement 13-06 to require active riding status when renewing any CIC certification expired for more than 2 years. Apparently, under a recent change allowing CICs to recertify even if they are not actively riding, a CIC expired for 18 years was able to recert. Go figure; there’s always a loophole to close.

14. For those inquiring minds fascinated with specialty course funding, the Bureau has modified reimbursement for CIU (Certified Instructor Update) courses to reimburse at a rate of \$15 per student versus the previous flat fee per class. Specialty course sponsors can also now charge additional tuition for any classes, if they wish to do so.
15. Got out your barf bags. CC is under review again. This time, a TAG has been appointed to compare AEMT to CC curriculum and protocols. Rich Beebe, who worked extensively on implementation of the EMS Educational Standards for AEMT told Med Standards that AEMT with some additions should be considered as a potential replacement for CC in some areas of NYS. There is also strong interest in programs that would transition CCs to Paramedic, a successful program recently concluded downstate. Of course, there are also folks who intend to fight to the end to keep the CC level intact despite it having no national equivalent. The whole thing oughta be interesting...
16. So, the National Registry is in the process of rolling out new psychomotor testing which raises the question of what NYS should do if the NREMT practical exams change. Our PSE (Practical Skills Exam, for you young folk) sheets mirror the NREMT forms. Short answer: T&E is keeping a watchful eye on the rollout. Stay tuned...
17. Finance reports that templates have gone out to Regional Councils and Program Agencies soliciting budget requests for 2017/18. Like it really makes any difference; budgets have not changed since the 1980's (when hippies were fashionable).
18. Systems Committee voted, and SEMSCO approved a decision to reverse the Wyoming Erie Regional EMS Council's determination denying an application by Mercy EMS to expand their operating territory to include the Town of Concord and Village of Springville in Erie County.
19. Legislative motioned and SEMSCO approved opposing any changes in NY Helmet laws. Assembly bill 3241 [www.nysenate.gov/legislation/bills/2015/a3241/amendment/original](http://www.nysenate.gov/legislation/bills/2015/a3241/amendment/original) would make any motorcycle operator aged 21 or older exempt from wearing a helmet. Thus far, 30 states have repealed their helmet laws. They don't call them donor cycles for nothin'.
20. A little update on community paramedicine: since the vociferous objections raised last legislative session by the home care industry, there is an effort underway this year to approve legislation to build a Community and Hospital Home Care Collaboration Program, designed to step outside existing laws and regulations to evaluate novel ways of addressing gaps in care. Should this legislation pass, EMS may have a window into Community Paramedicine or Mobile Integrated Health or whatever you want to call it.
21. Policy Statement 00-13 on Red Lights and Siren use is 16 years old and 7 pages long. It's due for a revision. The Safety Committee is all over it...Code 3.
22. The psychic hotline knew you were calling...and, "presto!" – 2016 ERGs (Emergency Response Guidebooks) are out. These lovable little orange HazMat guides are distributed by your County Fire Coordinator. You could get yourself a digital copy on-line OR (say it isn't so) download it as an app for your phone: <http://phmsa.dot.gov/hazmat/outreach-training/erg>.
23. If you know anyone interested in the EMSC (that's Emergency Medicine for Children in baby speak) Committee at DOH, there are multiple openings: look at the committee membership list at [www.health.ny.gov/professionals/ems/emsc/index.htm](http://www.health.ny.gov/professionals/ems/emsc/index.htm).
24. NYS DOH launched a new TBI (Traumatic Brain Injury) site with some pretty kewl resources: [www.health.ny.gov/prevention/injury\\_prevention/traumatic\\_brain\\_injury/](http://www.health.ny.gov/prevention/injury_prevention/traumatic_brain_injury/).

25. EMS conferences of interest include Pulse Check which is moving this year from Suffern back to Albany, September 29 – October 1 [www.nysvara.org](http://www.nysvara.org) and Vital Signs in Syracuse, Oct 13 – 16 [www.vitalsignsconference.com](http://www.vitalsignsconference.com). Registration for both is currently open.
26. Those of you familiar with Pulse Check know that my partner in crime Rich Beebe, who helped me coordinate the annual event for the past 7 years, died very tragically on June 5<sup>th</sup>, 2016 from injuries sustained in a motorcycle crash: [www.legacy.com/obituaries/timesunion-albany/obituary.aspx?pid=180265144](http://www.legacy.com/obituaries/timesunion-albany/obituary.aspx?pid=180265144) Rich was a consummate EMS professional, well known across New York State for his work as a paramedic author, CIC and mentor to many. His long standing involvement with the SEMSCO Training and Education Committee, his dedication to state and regional curriculum and protocol development and continued revision, as well as his work nationally on the boards of directors of NAEMSE (National Association of EMS Educators) and CECBEMS (recently renamed to CAPCE or the Commission on Accreditation for Pre-hospital Continuing Education) helped touch every single one of us. Rich was an icon, larger than life, an in-your-face instructor who did everything in his power to make EMS providers the best they could be. Most importantly, he was a great friend not only to me, but to many. His death leaves a large hole in EMS both nationally and across New York State that all of us will need to fill. In his memory, I will be asking the PIER Committee to consider renaming the EMS Educator of Excellence annual award in his honor. In my mind, there could be no greater recognition of everything Rich did locally, regionally, statewide, and nationally to advance EMS education. A FB Memorial [www.facebook.com/Remembering-Richard-Beebe-1729366273988819/](https://www.facebook.com/Remembering-Richard-Beebe-1729366273988819/) includes (scroll down) Alex Downey's Last Call Tribute video. Godspeed to our brother.
27. SEMSCO will next meet on September 13-14 and again January 10-11 in 2017. The meetings will remain at the Hilton Garden Inn in Troy.

These notes respectfully prepared by Mike McEvoy who previously represented the NYS Association of Fire Chiefs on SEMSCO before (finally) being replaced by Mike Murphy. Contact Mike at [McEvoyMike@aol.com](mailto:McEvoyMike@aol.com) or visit [www.mikemcevoy.com](http://www.mikemcevoy.com). If you want a personal copy of these "unofficial" SEMSCO minutes delivered directly to your email account, go to <http://eepurl.com/iaXHY> to put yourself on the list (or adjust your delivery settings) or go to the Saratoga County EMS Council NYS EMS News page at [www.saratogaems.org/NYS\\_EMS\\_Council.htm](http://www.saratogaems.org/NYS_EMS_Council.htm). There, you'll find a link to the list server dedicated exclusively to circulating these notes and all the past copies of NYS EMS News parked at the bottom of the page. Feel free to download any notes you missed. Tell your friends. The more, the merrier.