

1. Med Standards and SEMAC heard and subsequently tabled a proposal to move manual defibrillation from Paramedic to the AEMT level. The discussion was lively and surprisingly animated. Stay tuned on this – it will be resurrected in January. The TAG, workgroup (or whattayacallit) working on BLS protocols announced they still had some tweaking to do with their draft. That too, will be ready for the January meeting. Lastly, you might recall the FDNY in January 2017 proposing a demo project adding skills to the CFR level. This went down in flames after an impassioned plea from the Uniformed EMTs, Paramedics and Inspectors Local 2507 rep Don Faeth about the seeming lack of altruism on the part of FDNY. Well, lo and behold, it turns out said changes have been deemed FDNY operating procedures, not protocols; hence State approval is not needed. Whodda thunk it? Lastly, on the list of strange and interesting: ALS Services, Inc. filed an appeal of a Nassau REMAC suspension of their operating authority. An appeals review committee will report in (you guessed it) January.
2. BEMSAT Director Lee Burns announced her retirement at the end of this year. This will be no small event – Lee was the first and only Bureau Director to come directly from the ranks of EMS; she leaves a legacy of advocacy and accessibility that has truly made a difference. Deputy Director Thomas Behanna has also (already) departed for a position in the State Comptroller's Office; Frances Lopez, Voucher Clerk extraordinaire, known by every Course Sponsor and Program Agency, has left the Bureau. Donna Johnson, Executive Secretary to the State Council and Conference Director for Vital Signs will also retire at the end of the year after 35 years of service. No word on replacements.
3. The Stroke Protocol revisions that kinda went into limbo when they failed to come up for vote at the last SEMSCO have been rolled into the draft Statewide BLS protocol revisions. Watch for that in January.
4. The Bureau advised of a proposed change to Part 800.6(b) lowering the minimum age to become an EMT from 18 to 17. Apparently, the comment period ended, as it no longer appears at <https://regs.health.ny.gov/regulations/proposed-rule-making>. The impetus for this change likely arose from meetings orchestrated between Essex County and the Governor's office (thanks, Lee Burns). You may also see some further movement on revamping Medicaid rates for EMS transport based on these very productive talks. As an aside, the age change was hotly debated and ultimately approved by SEMSCO, which seems a bit out of synch since the Regulatory comment period opened and closed in the interim. Whatever...
5. Also on the regulatory front, the State Trauma Regs currently parked under EMS are in the process of being repealed and moved into Section 405 of the State Hospital Regulations. Nothing exciting or different than we know it – just codifying the switch from DOH vetting Trauma Centers to the American College of Surgeons (ACS) doing the verifications. Yippee.
6. N-CAP is a DOH program you might mention to families and friends of overdose patients. The Naloxone Co-payment Assistance Program details are at [www.health.ny.gov/diseases/aids/general/opioid\\_overdose\\_prevention/directories.htm](http://www.health.ny.gov/diseases/aids/general/opioid_overdose_prevention/directories.htm).
7. Get ready for further reductions in EMS funding. Next year's cuts will most likely reduce funding for the Bureau, not the Training Fund or Program Agencies. Rich Brandt has been saddled (at least temporarily) with the craptacular EMS Budget following the departure of Tom Behanna. Pray for Rich.

8. Some notes along the Training and Education lines: firstly, an update in on the way for the CME recertification program. It will roll out at Vital Signs and then to the whole world. No details on what it will involve, but rumor on the street is that it will be HUGE! Instructor exam pass rates are improving; CIC pass rates are up from 45% to 69% and CLI pass rates have leveled off at 85%. The Bureau is conducting a survey on interest in Computer Based Testing (CBT). The survey is on the Moodle site linked to at <http://training.vitalsignsconference.com> – you need to create a new account to access the survey. Note that NYS written exams use the NYS BLS Protocols, not the Collaborative Protocols. So hey, lookie there when you are fervently studying for your written exam. Lastly, the Bureau announced an intended expansion of specialty course sponsors – you know, the sponsors of CLI and CIC courses – giddyap!
9. The Bureau reports people submitting multiple written exam applications are playing their fax machine like a Vegas casino game. While it is fortuitous that the applicants apparently plan to fail, you can only register for one exam at a time. Multiple exam registrations will be denied. Get the word out to your homies: knock it off!
10. Now if you think the upcoming January 2018 State EMS meetings are gonna be fun based on all the business being put off until then, you should have seen the tour bus (yes, your read that correctly) of representatives from Western NY that arrived for the September meeting. The “tourists” came to show their support for an appeal by Twin City Ambulance asking SEMSCO to reverse approval by the Big Lakes Regional Council approval of Mercy EMS to expand their operating authority to include the entirety of Niagara County. The Systems Committee initially heard the appeal and voted to uphold the Big Lakes approval based on their review of the facts (amongst which included the Niagara County Legislature endorsing the Mercy expansion of operating territory). SEMSCO also heard the appeal and, after a nail biting five-minute break called because of a technical glitch in the webcasting equipment, also voted to uphold the Big Lakes approval. Seconds after the SEMSCO vote, the triumphant tourists filed out.
11. Another, apparently less crowd enticing appeal also came before Systems and SEMSCO. This appeal by Rockaway VAC sought to overturn a NYC REMSCO denial of their (RVAC) CON application for a new ambulance operating authority. Systems recommended and SEMSCO upheld the NYC denial.
12. Don’t be caught up in the recent “fentanyl analog paranoia” sweeping the nation. It is not possible to die from skin exposures to carfentanil, despite numerous stories of responder exposures being hyped in the media. For some clear-headed ideas, see <http://community.fireengineering.com/profiles/blog/show?id=1219672%3ABlogPost%3A639236>.
13. The Safety Committee reports draft revisions to the ambulance design standards (800.22) have been submitted to the Bureau along with draft revisions to Policy Statement 00-13 on EMS Vehicle Operations. Both should be available for SEMSCO review at the January meeting. Safety is also working on a scene safety awareness program for providers, de-escalation and defensive/escape tactics training and specifications for EMS provider ballistic vests.
14. NHTSA released the most comprehensive report ever published on EMS use of lights and sirens. See [www.ems.gov/pdf/Lights\\_and\\_Sirens\\_Use\\_by\\_EMS\\_May\\_2017.pdf](http://www.ems.gov/pdf/Lights_and_Sirens_Use_by_EMS_May_2017.pdf).

15. FirstNet, the national first responder cellular network, is moving forward. AT&T won the contract, worth \$100 billion over 25 years to AT&T. See [www.firstnet.gov](http://www.firstnet.gov) for more info. No word yet on whether NYS will sign onto the plan. If you're a diehard Verizon customer, fear not – the price and service wars are on, baby!
16. EMS for Children reports hospital regulations for pediatric care in EDs are in development. EMSC is also reviewing pediatric components of the proposed BLS protocols.
17. Vital Signs will be in Rochester, October 25-29 ([www.vitalsignsconference.com](http://www.vitalsignsconference.com)) and will feature a NAEMSE Instructor course as well as a Saturday noontime brown bag lunch with an open discussion of EMS issues moderated by State EMS Director Lee Burns and SEMSCO Chair Steve Kroll.
18. Sad news for some of you gray-haired EMSers out there: Dr. Michael Guttenberg has decided to enter hospice care for his terminal 9-11 related cancer. Few have contributed so broadly to EMS and Emergency Medicine in NY. Keep our brother in your thoughts and prayers.
19. The feds have a new poster available on preventing workplace injuries in EMS: [www.cdc.gov/niosh/docs/2017-194/default.html?s\\_cid=3ni7d2promo2017](http://www.cdc.gov/niosh/docs/2017-194/default.html?s_cid=3ni7d2promo2017). This comes on the heels of a four-year study by NIOSH of ED data. Great info!
20. Speaking of injury, NIOSH has posted more videos of their ambulance crash testing studies. Scope out their new stuff at [www.cdc.gov/niosh/topics/ems/videos.html](http://www.cdc.gov/niosh/topics/ems/videos.html).
21. The [National Association of State EMS Officials \(NASEMSO\)](http://www.nasemso.org) released an updated version of their model clinical guidelines (a reference for writing EMS protocols). Version 2.0 is available at [www.nasemso.org/documents/National-Model-EMS-Clinical-Guidelines-Version2-Sept2017.pdf](http://www.nasemso.org/documents/National-Model-EMS-Clinical-Guidelines-Version2-Sept2017.pdf).
22. The [National Highway Traffic Safety Administration EMS folks](http://www.emsagenda2050.org) are holding hearings around the country on the EMS Agenda 2050 (i.e., what is the plan for the next 30+ years?) - <http://emsagenda2050.org/regional-public-meetings>. They do have a straw man document developed by their working group: <http://emsagenda2050.org/wp-content/uploads/2017/03/EMS-Agenda-2050-Straw-Man-September-2017.pdf>. Since its release, blood has been boiling; some EMSers have organized petitions and you can bet your bippy the hearings will have overflow attendance. I won't spoil it for you – look at the straw man document yourself...
23. Got heroin? Or maybe some fentanyl? If you're still working the streets, you no doubt got it all. NYS has launched a web site to help your patients and their families: [www.health.ny.gov/community/opioid\\_epidemic](http://www.health.ny.gov/community/opioid_epidemic). Bookmark it.
24. SEMSCO took nominations for officers for next year. Patty Bashaw was nominated for Chair; Mark Phillippy for 1<sup>st</sup> Vice Chair and Steve Cady for 2<sup>nd</sup> Vice Chair. Elections will be in – you already know this – January.
25. You got these notes in your hot little hands and read all the way to the end probably because you wanted to know wazzup with the CC? Ask and you shall receive – the Bureau issued Policy Statement 17-07, which outlines the intended path for the EMT-CC sunset. See [www.health.ny.gov/professionals/ems/policy/policy.htm](http://www.health.ny.gov/professionals/ems/policy/policy.htm) and keep your eyes peeled for additional updates that will likely come through this same (Policy Statement) channel.
26. Talk about adding insult to injury: the FDA recently cited the maker of the EpiPen® for failing to properly investigate hundreds of auto-injector failures and had

inadequate oversight and control over EpiPen manufacturing. The letter is posted at [www.fda.gov/ICECI/EnforcementActions/WarningLetters/2017/ucm574981.htm](http://www.fda.gov/ICECI/EnforcementActions/WarningLetters/2017/ucm574981.htm).

Incredible that Pfizer is literally robbing EMS agencies blind selling poorly made and defective products.

27. Recent high profile news stories of financial ruin resulting from helicopter air ambulance bills led the US Government Accounting Office to examine oversight of air ambulance billing practices. They made several recommendations to the US Department of Transportation. See [www.gao.gov/products/GAO-17-637](http://www.gao.gov/products/GAO-17-637).
28. SEMSCO will meet again January 9-10, 2018 at the Hilton Garden Inn in Troy. No word on meetings beyond January.

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