

1. SEMSCO met February 7th and 8th. If you're feeling masochistic, the six hours of video are at: <https://vimeo.com/event/2777836>. Some pretty exciting things did happen this month!
2. SEMSCO/SEMAM observed a moment of silence for [Dr. John Detraglia](#), long time Midstate Medical Director and SEMSCO/SEMAM member, who died in January. In addition to his many years of EMS service, he started the trauma program at St. Elizabeth's in Utica. Godspeed to our brother!
3. Meeting at the same time as SEMSCO, the Health Planning Committee of the Public Health Planning Council (PHHPC, or affectionately, fippic, hippic or hiccup) convened their first 2023 meeting to discuss long ED wait times and the impact on EMS. Our former SEMSCO Chair, Mark Phillipy, represented us. Dr. Jeremy Cushman provided input on behalf of ACEP. The Bureau presented some compelling data you can view here: www.health.ny.gov/facilities/public_health_and_health_planning_council/meetings/2023-02-08/docs/ambulance_offload.pdf. We will see where this gets us. Ultimately, the problem is like a clogged toilet – we wait with our patients; ED patients wait for floor beds; hospitals wait to transfer patients to short staffed nursing homes and everyone waits for more nurses to magically appear.
4. Systems heard an old appeal (quite literally filed two years ago) from Chatauqua County asking to convert their municipal CON to a permanent CON, having been denied by their Regional Council. Systems and SEMSCO overturned the Region and issued the CON.
5. A SEMAM Advisory, "Selection, Use, and Approval of Medical Devices" was approved, setting a standard for agency medical director involvement and approval in the selection of medical devices for use by EMS agencies. It will appear eventually at the bottom of www.health.ny.gov/professionals/ems/policy/policy.htm.
6. Vital Signs 2023 will be in Syracuse, October 17-22. If you're quick, you can still slip in a speaker proposal at www.vitalsignsconference.com.
7. This year's EMS Memorial Dedication will be held at the Empire State Plaza on May 23rd of EMS week at 11am. Groups or vehicles attending should reach out to Valerie Ozga. See www.health.ny.gov/professionals/ems/emsmemorial.htm.
8. A landmark report was issued by the EMS Sustainability TAG, led by Chief Mike Benenati. The report notes that EMS has markedly deteriorated over the past several years due to declining volunteerism, lack of public funding to cover costs of readiness, inadequate staffing, rising costs, insufficient insurance reimbursement, rising call volumes, a lack of performance standards, poor understanding of the EMS system by elected officials and the public, NYS home rule, and lack of transparency and accountability for EMS agencies. It makes 25 very strong and actionable recommendations for change. This is a MUST READ for any EMS leader nationwide (you could substitute any state name for New York): www.health.ny.gov/professionals/ems/docs/february_2023_sustainability_tag.pdf.
9. The Quality Metrics committee proposed, and SEMSCO approved, a Quality Improvement Manual and roll out plan. Much more to come on that, but here's a sneak peek: www.health.ny.gov/professionals/ems/docs/february_2023_presentation.pdf.
10. Training and Ed had a busy agenda. Two new PSI testing sites have been added: Burlington, VT and Erie, PA. These will serve students who currently travel long distances to test at NY sites.

11. During 2022, NYS tested 10,756 students broken down as:

Cert Level	# Courses	# Tested
CFR	58	892
EMT	573	8972
AEMT	29	203
Medic	64	689

12. Reciprocity was granted to 1,200 applicants (750 were EMTs) and denied to 140, typically because in-person class time in their training course was less than 50%.
13. Ten years of certification data showed no significant changes in numbers of course sponsors or in numbers of students testing at any level with the exception of an increase in paramedics over the two most recent years.
14. Two workgroups will be established by T&E: one jointly with the finance committee to examine changes in course funding; a second to review instructor certification and recert requirements.
15. The Bureau will continue work with T&E on revisions to the BLS PSE (Practical Skills Exam). Tweaks are needed in the administration manual and extensive preparation will be required for instructors, examiners, and students. Likely looking at a 2024 implementation, if then...
16. Review of testing issues for 2022 Q4 showed 6% of exams had issues: only 2% were scheduling problems; site issues, missing scores, and name errors account for most of the remainder. Newly posted instructions on the Bureau web site should help considerably: www.health.ny.gov/professionals/ems/certification/exam_registration.htm.
17. Discussion on preventing course sponsor overlap continued. The planned implementation of a new license/cert tracking system by the Bureau would allow all courses in NYS to appear on a single web portal. That might go a long way to improve access to courses and prevent overlap.
18. Med Standards and SEMAC continued discussions on BLS Collaborative versus NYS Protocols and whether they could be merged to eliminate miniscule differences. A motion was passed to accept the Collaborative as the statewide BLS protocols, excepting cities of > 1 million in population. We will learn shortly whether this is legal...
19. EMSC demo'd a couple pediatric restraint systems for transport: www.saplacor.com, and www.ferno.com/us/product/kangoofix-neonatal-restraint-system?hl=en-us. They also reported working on an educational component for their pediatric agitation protocol.
20. Pedi data requested from the Bureau showed 18,259 pedi (< 3yo) transports in 2021 of which 92% had a weight documented and 12% received a med, the most common of which were oxygen, albuterol, ipratropium, midazolam, and decadron. In 2022, there were 25,154 pedi moves of which 98% had a weight documented and 14% received a med, the most common of which were oxygen, albuterol, ipratropium, midazolam, and DuoNeb. Not bad!
21. EMSC wants you! To complete their survey: <https://emscsurveys.org/step02.aspx?state=New%20York>. Wouldn't hurt to see if your agency is listed. If you are, it is likely that no one completed the survey yet.
22. There was a LONG discussion about Regional credentialling stemming from a Suffolk County inquiry. Ultimately, it was decided to stop beating a dead horse.

23. SEMAC approved a protocol change policy which, BTW, anyone can submit suggestions to. If you have a stroke of genius, even if it's at 3 in the morning, surf to <https://redcap.urmc.rochester.edu/redcap/surveys/?s=XMXFDFMEA9>.
24. The AEMT protocols were amended to allow use of an advanced airway device (i.e., SGA) in unresponsive patients if equipped and trained. Previously this only applied to adults.
25. The Bureau reported that their master forms page is now up and working. See <https://apps.health.ny.gov/pubpal/builder/EMSForms>. They should be rolling out a portal for voucher submission (on-line) shortly. Yay!
26. Data informatics (the ePCR people) will be reducing the frequency of updates. Great news for your agency ePCR gurus. They hate updates.
27. Regulatory changes to education and ops should be published for public comment by May.
28. Speaking of changes, here's an interesting revision of State policy, now allowing ambulance services to participate in the NYS Health Insurance Program (NYSHIP): www.cs.ny.gov/employee-benefits/nyship/shared/apps/policymemos/viewMemo.cfm?memoId=164. Previously, it was virtually impossible to be classified as a Participating Agency as no one really believed EMS could be a public entity, despite our being publicly funded.
29. ET3 (Emergency Treatment, Triage, and Transport) was discussed at the EMS Innovations committee with multiple providers describing their experiences. Pathetically, NYS Medicaid reports paying only 535 claims since the program started. Roadblocks appear to be educational (patients and providers), provider buy-in, complexity, and patient selection. The Innovation committee will innovate solutions.
30. Part S of the Governor's Budget proposal contains some pretty extensive reforms for EMS, many of which were influenced by feedback on last year's budget proposal. Take a look: www.budget.ny.gov/pubs/archive/fy24/ex/artvii/hmh-bill.pdf (you have to click on "Part S" to get there). SEMSCO had some pretty extensive discussion and ultimately, recommended that Section 3033 be removed (EMS Districts). Both the [Assembly](#) and [Senate](#) released one-house budget bills this week which take different approaches to Part S. What seems apparent is that the whole thing won't be killed like happened last year.
31. SEMSCO/SEMAC meetings for the remainder of 2023 will follow the same schedule as the February meetings to allow folks to plan their travels: www.health.ny.gov/professionals/ems/docs/semSCO_semac_february_2023_agendas.pdf. Meetings will be held at the Hilton Garden Inn in Troy on May 9-10, September 12-13, and December 5-6.

These notes respectfully prepared by Mike McEvoy who serves on SEMSCO representing the NYS Association of Fire Chiefs. Contact Mike McEvoy at mmcevoy@saratogacountyny.gov. 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). Also, past copies of NYS EMS News are parked at the bottom of the EMS News page at www.saratogaems.org. Feel free to download any notes you missed. Tell your friends. The more, the merrier.