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HUDSON VALLEY REGIONAL EMS COUNCIL

CORPORATE MEETING
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MINUTES OF MEETING, held via Zoom, on
Wednesday, May 20, 2020, at 7:00 p.m.

Yvette Arnold,

Court Reporter

ROCKLAND & ORANGE REPORTING

2 Congers Road

New City, New York 10956

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A P P E A R A N C E S :

RICHARD PARRISH, NREMT-P
President

DENISE MONTANA, EMT,
Treasurer

NICHOLAS TRIO, EMT
Secretary

DR. MARK PAPISH,
Medical Director

WILLIAM HUGHES, EMT
Executive Director

OFFICE STAFF

JEFFREY CRUTCHER, QI Coordinator
KAREN DELAUNAY, Office Manager

DUTCHESS COUNTY

NICHOLAS TRIO
DAVID VIOLANTE
DEE SAGENDORPH
TIM MURPHY
SHARON FRAZIER

ORANGE COUNTY

BEN CONQUES
WAYNE CHAN
DAVID GRASS
ISRAEL KNOBLOCH

PUTNAM COUNTY

DAVID JACOBSEN
DENISE MONTANA

1 A P P E A R A N C E S : (Continued)

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ROCKLAND COUNTY

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TIM EGAN
4 DESIREE LEONE-STOLL
GLEN ALBIN
5 BJ LEIDNER

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SULLIVAN COUNTY

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NEAL MEDDAUGH

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ULSTER COUNTY

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RICHARD PARRISH
TIMOTHY MITZEL
11 KAREN PARDINI

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ALSO PRESENT:

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JOHN MAHONEY
CASEY QUAKE

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MR. PARRISH: Welcome. This is a new experience for a lot of us. The ground rules are, keep your phone on mute. We will have you on mute unless we have to do like a roll call and then we will open it up, but whenever possible keep your phone on mute. And when you talk, please announce who you are so that the transcriber can get everything down. All right?

So we will start off with Nick.

MR. TRIO: Okay, roll call.

Dutchess County.

Nicholas Trio? Present.

Dave Violante?

MR. VIOLANTE: Dave Violante, here.

MR. TRIO: Joan Siebert? Is Joan here?

MS. SAGENDORPH: I saw her on before so I don't know.

MR. TRIO: Okay. Tim Murphy?

MR. MURPHY: Here.

MR. TRIO: Dee Sagendorph?

MS. SAGENDORPH: I'm present.

MR. TRIO: Guy Carpico?

Tim Gilnack?

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Sharon Frazier?

MS. FRAZIER: Here.

MR. TRIO: Michael Bigg?

Orange County.

Ben Conques?

MR. CONQUES: Here.

MR. TRIO: Wayne -- oh, wait, Ben, you
are here? Okay, thank you.

Wayne Chan? I thought I saw him --

MR. CHAN: I'm here.

MR. TRIO: Okay. David Grass?

MR. GRASS: I'm here.

MR. TRIO: Israel Knobloch?

Kelly Pikul?

Frank Cassanite?

Jon Hansen?

Okay, Putnam County.

Robert Cuomo?

David Jacobsen?

Denise Montana?

MS. MONTANA: Here.

MR. TRIO: Matthew Bondi?

Would you please go on mute?

Okay, let's try and keep going.

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Kim Lippes?

Nick Rusiecki?

Tim Egan?

MR. EGAN: Here.

MR. TRIO: Desiree Leone?

MS. LEONE-STOLL: Here.

And just, Kim has been deployed. She just found out late last night and was flown out today so she couldn't make it last minute.

MR. TRIO: Theresa Hamilton?

Neil Dahan?

B.J. Leidner?

MR. LEIDNER: Here.

MR. TRIO: Okay, Sullivan County.

Albee Bockman --

MR. ALBIN: You didn't put my name down.

MR. TRIO: What's your name? Hold on -- got you. Sorry.

Sullivan County.

Albee Bockman?

Alex Rau?

Neal Meddaugh?

MR. MEDDAUGH: I'm here.

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MR. TRIO: Okay, Neal.

Heidi Stack?

Mike Bruce?

Marc Strauss?

Ulster County.

Richard Parrish?

MR. PARRISH: Here.

MR. TRIO: Kelly Nelson?

Dorothy Bailin?

Tim Mitzel?

MR. MITZEL: Present.

MR. TRIO: Lisa Servino?

Karen Pardini?

MS. PARDINI: Here.

MR. TRIO: Oh, you are here, Karen?

Thank you.

Let me just count them up real quick.

One, two, three, four, five, six, seven,
eight, nine, ten, eleven, twelve, thirteen,
fourteen, fifteen.

We have seventeen people who are
eligible to vote, thirteen for quorum so we
are at quorum.

MR. PARRISH: Okay --

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MR. QUAKE: FYI, Casey Quake from Putnam County.

MR. TRIO: Okay, thank you, Casey. I don't see you on the list though.

MR. QUAKE: I don't know. I was told to join.

MR. TRIO: Okay, well, welcome.

MR. PARRISH: Okay. Minutes were distributed. Any additions or corrections to the minutes?

If not, motion is in order.

MR. EGAN: I'll make a motion.

MR. PARRISH: Tim Egan. Second?

MS. SAGENDORPH: Second.

MR. PARRISH: Looked like Dee, Dee Sagendorph.

All right. President's report. It's been an interesting couple of months, but I'm sure you guys all had some interesting experiences, from where I've been at it's been COVID all the way.

But in the meantime, I had two requests from two agencies. One was for Marbletown First Aid, they are interested in researching

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course sponsorship. I gave them a copy of the classroom requirements and also the course administration manual. I offered to do a walk through, but because of COVID they are holding off on outsiders in their building.

Also, I have a request from Ellenville First Aid. They would like to host an EMT class, not become a course sponsor. Where they are, it's kind of remote. I went down and I looked at the facility, would be usable for a class. For my program, I don't have the resources at this point to commit to being the CIC or CLI for it. If there is anybody out there that is interested in getting involved in that program, you know, get back to me and I'll work with you to get something going down there. All right?

I have been participating in the weekly EMS leadership meetings, the conference calls. If you have an opportunity to sit in on them, I don't think you have to rush to do it every week, they seem to rehash a lot of stuff, but once in a while they are

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interesting, same thing with the course sponsors. And I'd really like to put a big thank you out to both Dave Violante and Mike Benenati and Scott --

(The speaker could not be understood.)

MR. PARRISH: -- and that crew for putting together the EMS Task Force. I think that it pulled a lot of people together to look at some potential issues. And they looked at what would have to happen if we had to evacuate hospitals or anything like that, brought up the issue of looking at nursing homes. And nursing homes have been the big thorn in our side right now, so paying attention to that. Did a quick overview for them of what the MACE Team is, what E vines are and then how the hospitals use a different tagging system than the smart triage tags. But I think that they brought a lot of people together even from police and fire side, it was a great resource. I think they accomplished a lot. Hopefully we will continue it at least monthly to keep this thing going. A lot of good things came out

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of it. Hopefully, it doesn't fade away.

Working with Bill and the office from home, the staff has been doing a good job of keeping things moving. And hopefully everybody has had any dealings with them has been on the positive side. Everything I've done with them has been very good. I like what happened, all right?

So pretty much that's where I'm at and what I've been doing and dealing with COVID in my full-time job has been a full-time job also.

Basically that's it for now. I got some other things I can bring up later, but hopefully each committee will bring up their report.

Any questions?

If not, Denise, treasurer's report?

MS. MONTANA: So the report that I'm presenting is from February 19th until today. We wrote out 28 checks, totaling \$18,092.29, rent and health insurance were our top expenses. I did two -- I did two transfers for payroll -- two payroll transfers, each in

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the amount of 35,000, the first one on March 4th and the second one on May 11th. There were no deposits made during this period. Under the New York State vouchers we received \$65,928.39 for the second quarter reimbursement for program agency; 5,288.66 for the third quarter reimbursement for Council; and a total of \$48,524.68 for the third quarter for program agency and the fourth quarter reimbursement for Council. During this quarter there was no activity in conference or education. And the account balances as of 5/19/20: In the program agency we have \$143,016.97; in conference and education we have \$48,757.27; and in payroll we have a total of \$35,475.23; for a total of \$227,249.47.

If anybody is interested in getting any copies of anything or details, you can either call myself or Bill and we can get you anything that you need. That's it, that's all I have.

MR. PARRISH: Any questions of the treasurer?

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At the Executive Committee meeting we talked about the treasurer and getting a way to pay bills electronically and Denise is going to investigate if there is ways we can do that and that way Bill is not running up and down the Thruway getting signatures. Hopefully, we will see some reactions to that.

All right, regional report there, Bill?

MR. HUGHES: First and foremost I would like to thank all EMS providers of the Hudson Valley for their exemplary service during this pandemic and for their bravery and their fortitude and their professionalism during the battle on the front lines. It's been a great job. Unfortunately we have had some losses as a result.

I too would like to thank the members and participants of the Hudson Valley EMS Task Force. They spent a lot of time and a lot of effort ensuring the Region was aware and prepared for all the emergent situations that we incurred during this process. I particularly would like to thank David

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Violante, who spearheaded the task force and Michael Benenati, who is the cochair of it. And since March, in March we started it and --

(The speaker cannot be understood.)

MR. HUGHES: At the beginning when we first started the task force we were meeting daily and then as the meetings subsided a little bit and we got a little more organized we started meeting twice a week. I'll let Dave Violante talk about that, some of accomplishments that we had and something of the things that we really have done with the task force. It's a great group of people and there was a lot of work done there.

I would also like to remind everybody about directive --

(The speaker cannot be understood.)

MR. HUGHES: -- nominations for EMS team and provider recognition for EMS week. I sent it out to everybody. If you haven't gotten it, it's a special recognition for people that have performed excellent during this whole process and it can be put in by a

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Region, it can be put in by an agency, it can be put in for a team, it can be put in for a person. It's available on-line. You fill out the form and just submit it. They would like to have only one form per agency so if you have somebody in your agency that did a really good job and you want to get some recognition for them, please forward that. At this point in time we have 70 of them. They are going to continue until the end of the week, the end of this week and they will do whatever they will do with that. So if you have somebody that really deserves some recognition, please put their name in and let them be recognized.

We have been working remotely and we have been pretty busy in the office doing all kinds of things, trying to send out a lot of information, we've been working on protocols, we've been sending protocols, we've been looking at guidance documents and entering all kind of questions and just a lot of stuff happening in general.

But I do have a few things that I'd just

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like to pass onto everybody and it will help us move on into the future a little bit.

All agencies should have two people authorized to sign in to HCS. HCS is the Health Commerce System that is supported by the Bureau of EMS that allows us to look up people for the certifications, it allows me to transfer confidential information to the Bureau, and it will allow you guys to do more stuff and the Bureau will start communicating to agencies via the Health Commerce System.

So either Jeff or myself can sign you up for it. You have to go to Health Commerce, get a sign on, send us that sign on, copy of your license and letter from your organization that says that you can be HCS coordinator for your organization. You do that we can have -- we can process everything for you at that point, so everybody should be doing that.

The REMSCO contract, we have a five year contract that comes due at -- that is ended at the end of June, that contract will be extended for 27 months. And the program

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agency contract, which is the other contract that we have, that will be extended for 24 months, giving both of them an ending date that coincides. Right now there is a quarter between them and it really causes confusion when you start talking about which quarter you are in and what the money is so this way it will end at the same time. It's basically a two year extension on both contracts.

We have been attending three meetings a week with the Bureau of EMS, on Tuesday we attend a program agency COVID meeting, on Wednesday we attend the EMS leadership meeting, Thursday we have the course sponsorship meeting. And every Monday, Wednesday and Friday the staff and I get-together, we have a conference call in the morning. Rich is there sometimes. And discuss what our plans are and what we have to do over the next couple of days. So we are working fairly well from home and seem to be doing pretty good.

Due to working at home it has created some issues on the finance department getting

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checks signed and paperwork. We have been working with Denise and --

(The speaker cannot be understood.)

MR. HUGHES: -- stuff has been going out where we automatically pay some of the bills that way --

MR. PARRISH: Hold on, Bill.

(The speaker cannot be understood.)

MR. HUGHES: Just so you know the National Ambulance contract in New York City, the providers down there are using paper PCR's. And a lot of the program agencies have been recruited to key those paper PCR's in the electronic system so they can follow the transactions and find hot spots that they have to go to and get different information from what is happening with the National Ambulance Service. At one point -- at the maximum point they had 350 ambulances in New York City, right now they are down to 160. They should all be done by the end of this week, I think it's 10 days from Tuesday. So by middle of next week New York City should be back on regular ambulance service without

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anybody from the outside helping. So Jeff has been diligently keying in PCR's from New York City to help them, along with probably 12 or 15 other program agencies.

We have been conduct all of our regular meetings electronically. Our training meeting we had electronically, protocol we had electronically, the staff meetings are done electronically, task force we have done electronically, the executive committee before this and now we are doing this. We have the authority to do that by Executive Law, that Executive Law expires on June 7th. If it's renewed, we continue. If it's not, then we will have to do something else. We will have to see how things come about.

Just as point of information, I don't know if anybody was aware that Legoland was supposed to open up July 4th of this year. I spoke with their administration a couple days ago. They said they are not opening this year, they are postponing to next year, but they do not have a date as of yet. So if Orange County -- it's going to be a lot of

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activity so we will have to see what happens with that. They actually stopped working on it.

Just want to make sure all agencies be aware and be prepared for a second wave if it does come. Make sure that you have your equipment in place, PPE available, don't drop your guard at this point. Make sure you can take everybody, contamination, people are protected, make sure their mental health is stable. There's a lot of things going on that can affect them so just be aware, be alert, watch what is going on. You know, react, if you need help with anything, let us know.

Also, be aware of the pediatric at multi-system inflammation syndrome, which is what we are experiencing now throughout the State. There's been multiple deaths -- I'm not sure if it's four or five -- younger people that are suffering from this disease that is a result of COVID that we thought wasn't going to affect our smaller population. So just be aware of that.

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The EMS Tree of Life Memorial was postponed. It was supposed to be yesterday. It will occur at a future date, but just to keep with making sure everything -- all the EMS providers that have died in the line of duty are remembered. Director Greenberg, Assistant Director -- Deputy Director Steve Dziura and Dr. Zucker, the Commissioner of Health, placed a wreath on the Tree of Life Memorial yesterday morning.

And the only other business that I have is we might have a possible upgrade request from ambulance to upgrade to ALS service. They talked to me on Friday and were looking to do that, but I have not gotten any paperwork on it since then so we are still waiting to see. They do have a certificate, they bought the certificate from TransCare. And they are looking at making that certificate an ALS certificate.

And that's the end of my report.

MR. PARRISH: Any questions of Bill?

Okay, if not, thanks, Bill.

QA/QI report?

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MR. CRUTCHER: I'm going to start kind of backwards. Bill gave me a request this morning regarding Narcan usage. To date from 1 January to today we had 529 opioid overdoses compared to the same time frame in 2019 it was 335. That represents about 50 more per month. Not significant, it really kind of falls in line with previous years. I know other areas have seen an up surge in Narcan usage in the last month, we are not really seeing that here now yet, but we probably will as the weather gets warmer, regardless of anything else that's happening.

The Schematron changed in early April to reflect changes for tracking COVID-19, a little late in the game to really do us a serious amount of good. What I had created previous to that was an all-inclusive report from 1 January until the end of April, which represents approximately 45,000 calls. Basically going back through those to see when we started to have a cluster of COVID type of calls, still working on kind of filtering that down to see if we can set

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something up that would trigger a notification to us when we see that again or when we see flu like symptoms or anything else that would possibly be recognized as a pandemic. The first time through that report it was about 20 hours to break everything out. And I did forward that report to Dutchess County Task Force and broke out what they could have, the different areas of dispositions, whether it was an RMA, a cardiac arrest, cardiac arrest was terminated. So it was a fair amount of work to do that, but it's like anything else, it's the first time that is going to be the longest and the most tedious. We can continue that type of reporting and that type of comparison month by month at this point, it won't take that much time.

New York State is going to be releasing the Schematron. The date is -- from Peter Brody -- sometime before the end of the year and it's going to include questions for BLS FR agencies. It's going to represent an additional -- what he said -- 200 some

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questions. We already know that when vendors get presented with this we have issues so we can probably anticipate some issues but that's --

(The speaker cannot be understood.)

MR. CRUTCHER: And we do also still have some vendors that aren't inputting data. One large vendor, Creative, is still not inputting data for us. I know they are having issues with New York City and they are going to be priority, but at some point in time they are going to have to fix the agencies in the Hudson Valley.

And that's really the synopsis of the past couple of months, we've been busy.

MR. PARRISH: Any questions of Jeff?

Thanks, Jeff.

All right, committee reports. Training.

Go for it, Dave.

MR. VIOLATE: We have no training. That is actually not very true at all, there has been a lot going on. I'm going to try and share screen -- no, that's not going to work. Okay, we will do it another way here.

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But I do want to first thank everyone, say happy EMS week to everyone. We've been under a lot of stress and pressure and doing all kinds of work. I think it's great, everyone is doing a super fantastic job. So certainly much thanks to all of our EMS personnel, to leadership of the agencies, a huge shout out to our medical directors, who have been dealing with us on the protocol committee and these other committees and all of these sort of seemingly weekly changes that come out of policy changes from anybody. And, of course, to the Region. The Region has really stepped up in all of this and done a huge amount of work and I just wanted to give a shout out to those folks because they are really doing a lot in the different committees and meetings and things.

So to that end, first, I will talk quickly about the task force here. In Dutchess County Commissioner Dana Smith requested that a number of us sort of get-together to discuss what some of the major issues were that we thought we were

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going to see and how we maybe able to mitigate them. That expanded out from the EMS coordinator, fire coordinator and dispatch personnel to major agencies and commercial agencies and municipalities of Dutchess County, to include Ulster County, Orange County, and then all of the other counties, Sullivan, Rockland, Putnam. And so we ended up having twice a week meetings with all of the county EMS coordinators, some fire coordinators, dispatch agencies, all of the commercial services and major municipalities and came out with some issues that we were all sort of facing and how we could mitigate them at the regional level.

The first thing that came up was a hospital surge decompression planning document whereby all of the counties were able to come together and have resources ready -- EMS resources ready at a moment's notice on stand-by for 48 hours in advance for BLS and ALS services should a hospital need to be compressed. We put together a multi-page document that everybody agreed on,

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it was sent out from the Region to all of the hospitals, hospital administration, so that they would be should they need to be compressed. That worked out amazingly well. We didn't need to institute that and it's great though that we have it and we can use it in the future. It was getting pretty close there. After that happened --

(The speaker cannot be understood.)

MR. VIOLANTE: -- we may have to use it with the nursing facilities.

So the other issue that we were talking about were really some other general EMS issues that every county was facing. We did a lot of discussion about planning for when we are going to begin to reopen and potential civil unrest scenarios. Every county was able to report their statistics on COVID cases, EMS agency readiness, planning and logistics that they had and we were able to bounce ideas off each other. That went on twice a week for a pretty good amount of time and we just moved that down to once every two weeks. And probably after things start

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opening up here and we see how things play out, we may end up meeting once a month and then probably once a quarter after that considering we have those good open lines of communication among all of us. So that was the task force that started in Dutchess County so it spread out to the Region and everybody involved in it. So a really good -- it still is a great group and we continue to do a lot of good work. So a huge amount of thanks to everybody on that committee, that has done a tremendous amount of work and planning and it shows the dedication of EMS in all of our communities region wide.

So any questions on the task force before I move on? Okay, great.

So I won't be able to share my screen, but what I will do is create a pdf of this document that I'm going to sort of reference. And I'll send that out to everybody tomorrow when I get back into the office so you have the information that is contained in this. So people don't have to worry about the

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e-mail addresses or scribbling notes or things like that I'll send this out.

When Bill was talking about the leadership program agency and educational conference calls there were a lot of Bureau of EMS staff on those big league calls from Director Greenberg, Deputy Chief Jean Taylor, Unit Chief Jean Meyers, Unit Chief Liz Donnelly Unit Chief John McMillan and program coordinator Valerie Halstead and we talked about a variety of issues that are coming out of the State, things that have obviously been very fluid, you have all been a very big part of that. Please know that a lot of us are working on the sidelines, behind the scenes, in front of the scenes to try and make things as smooth as possible, disseminate the information as smoothly as possible and get things back to the State as well and to that end there are a number of regions and counties that have had some issues. The Region has definitely had the ability to reach out through that chain of command to make sure that some of the resources are out

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there for the different agencies and for different counties. So, again, kudos to them for that.

All right, so let's talk about some education things down the line here. Computer-based testing is pretty much going to be the only option until further notice, this is all from John McMillan. And so that's where it's going to stand. If you have any questions about computer-based testing, please check with your course sponsors, have your students check with their course sponsors, they know who those folks are and what they need to do. The course sponsor should know this information and have this information. If anybody does not, the students know this information or have this information and the course sponsor isn't sure, have them reach out to the regional office and to me so that we can get that straightened out. The folks -- there is a lot of good information out there on that. That's A.

B., vital sign academy is operational

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for those of you who are not sure about that. The state has a website, vitalsignacademy.com and there is a calendar on there. And what they have been doing are COS --

(Interference on the Zoom conference.)

MR. VIOLANTE: -- thank you so much, appreciate that. That was not one of the things on vital sign academy, but I'm sure in the future it could very well be.

In any event, if you go to vitalsignsacademy.com they have presentations, BLS presentations are on Tuesdays, ALS presentations are on Thursdays. These are a combination of core, noncore and CIU's that are up there. At the moment a lot of these are live presentations, but some of them are recorded and recorded omnes will be up to view later. And these are the top CIC's and so they will count towards core and noncore materials for all of your refreshers and CME based refresher programs. So vitalsignsacademy.com.

They are looking for educators to do classes. We need other ones to step up so if

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anyone is interested contact John McMillan at the State. Again, I'll send out this information and you will have his contact information.

Okay, Jean Meyers from the State relates that if a student has completed a course and has not received notice from PSI, which is the testing agency, they should e-mail PSI and contact the State and try and work that out so that they can get their letters from PSI and be able to be active in the system.

From Liz Donnelly at the State, CIC candidates that are in internships should contact her directly about extensions for completely their internships. They want people to finish as soon as possible, but if you haven't been doing anything for the past 15 or 16 months you are not going to be doing anything for the next 15 or 16 months. You definitely have to have most of your stuff done for them to try and move you through the system a little easier.

The information for computer-based testing that Jean was talking about is in

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this document. I will send that out, it will make sense when I send it to you.

Every current provider has received a one year extension on their certification. There's no need to do anything, the State has done this. You will eventually get a new card. Nobody is in the office so they can't put them together and mail them out. But agencies can confirm through the Health Commerce System whether someone has an expiration date that's sooner or later and if someone actually is certified through the State. And everybody is, of course, eligible --

(The speaker cannot be understood.)

MR. VIOLANTE: -- you do have to submit that at least 45 days in advance. One of the things that they are saying is that for your recertifications since you have the year extension, they are working on a system to be able to take your current CME recert if you have already submitted it and still add the year so you don't have to wait within the eight month window before you submit your

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recertification. More will come out with that, but at the moment everybody's certifications are extended by one year.

MR. TRIO: Dave, Nick Trio, I have a question. There seems to be some confusion. A lot of our people seem to think it's only people whose certification expired this year were extended one year. Now, I expire 2022, am I now extended to 2023?

MR. VIOLANTE: As I understand it, yes.

MR. TRIO: Okay, thank you.

MR. VIOLANTE: Sure. So that's one of the reasons why this information is great to be disseminated from the State here and from here to the agencies so we clear up any of those issues. Any questions have the agency go to the Health Commerce System, look up individual and see their new expiration date.

There are a number of providers who applied for provisional certification, whose certifications have previously lapsed and they were able to go to the State, submit an application and on a quick background check have their certification reinstated, about a

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little more than 2,000 providers did this, all of their expiration dates for those people who were reinstated is 12/31 of this year. People can do a CME recertification, again, it has to be submitted at least 45 days in advance of the expiration. So it is possible for those folks to continue with their original recertification on to just regular recertification -- or certification.

Additionally, the REMAC, Hudson Valley REMAC, has also extended their ALS medical advisory committee cards to correspond to the New York State cards. And they have also suspended requirements for medical control hours, I believe through the end of the year.

Is that correct, Bill?

MR. HUGHES: Yes. They will recertify them up until the end of the year and start with the regular system, regular amount.

MR. VIOLANTE: Great, thank you. For anybody with AHA cards, the AHA has extended certification of cards that expired in April -- March and April, I believe, correct me if I'm wrong, Dave Grass, I think it was

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180 days on that, it maybe extended further.

MR. GRASS: One hundred twenty as of right now.

MR. VIOLANTE: I'm sorry, okay, yes, 120. I knew it was more than 90, but less than 200, shooting in the middle. Okay, so providers have those cards extended as well.

Speaking about extensions from the State, we talked about current providers and certifications being extended for one year, that includes EMRs, EMPs, paramedics, CLI's and CIC's. So if you have a card from the State in your wallet it's extended by a year.

Okay, other things about education. Course sponsors are encouraged to start new class and they can. There are a lot of different ways to deliver materials, many of which are very innovative and many course sponsors are doing those things now and probably a number of these are going to prevail in the future. So don't stop teaching the courses, use this as an opportunity. A lot of these agencies or course sponsors are putting the didactic

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material up front and the rest of the material towards the end of the program to sort of see what pans out as things begin to open up. So there's a lot of unique and interesting things going on now in education, a lot of exciting stuff and we will see what sort of comes with that.

There's a question that came up about doing a practical skills exam via Skype, or some kind of meeting like Zoom, Skype, et cetera. And the answer from the State was that they will most definitely look at the possibility of those things happening and consider those options. That doesn't mean that your CME, you know, that ends in another month or so and you need to do your skills exams and you can just jump on and do it, these things have to go through the State and they have to be authorized, et cetera. So, again, check with the course sponsor if there is any questions, they are working on all of those.

I believe I have talked about almost all the stuff. Another shout out really to our

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medical director and our REMAC chair, as they have navigated a ton of medical changes as they evolved along with the protocol committee and the regional support in just making some of these sweeping changes that are out there seemingly changing on a daily, sometimes weekly basis from a bunch of different agencies and just rolling with this. So hang in there, folks, there is probably more to come as things open up.

Stay safe. Thanks to everybody. And I will most definitely take any questions anybody has.

MR. QUAKE: Dave, it's Casey Quake. There is no restriction on conducting PSEs, the practical skills exams, as long as we are doing social distancing, blah-blah blah-blah blah-blah, blah, we are allowed to conduct those still, correct?

MR. VIOLANTE: I would just like to know how you put in the minutes blah-blah, blah-blah, blah-blah, blah?

But as I understand it, Casey, please check in with the State to be sure that they

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know how you are doing what you are doing so that everyone is on the same page. I think if they are surprised by something they may react to it negatively because they are not sure what is going on so just follow-up with them. But I believe that, yes, you should be able to continue to do some of the PSEs in a variety of ways.

MR. QUAKE: Okay, thank you.

MR. VIOLANTE: Absolutely.

MR. GRASS: David, if I may?

MR. VIOLANTE: Yes, please.

MR. GRASS: Dave Grass. Casey, just to answer your question, one of things that came out from Jean Taylor was, as David said, they would like for you to practice social distancing. So some of the things they were suggesting to the course sponsors was no longer rotating multiple students through single stations, but to actually setup a patient, even if it's a simulated -- or a proctor or a simulated patient and then keep the same group for all skills, which is kind of different from what we have always done in

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the past. But as David said, run whatever you are planning on doing past them. They have been pretty willing to work with any sponsor out there to make sure that the students have the opportunity to complete on time.

MR. QUAKE: Okay, yeah. We came up with a modification document and guidance for all of our agencies and we are going to be moving 86 students through the PSE over the next 30 days or so. So we have sent it up, I just wanted to make sure there wasn't anything that I -- in the recent past.

MR. GRASS: No, but as an example if you run the PSE over multiple days, they want you to track over the PSE over multiple days, but send one universal completion form, don't send multiples.

MR. QUAKE: Right. We're doing six at a time, you know, we had six breakout rooms and so on and so forth so -- thank you.

MR. VIOLANTE: I think the biggest take away from all of this is for any agency or student to please reach out to your course

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sponsor if there is any questions at the course sponsor level and have them reach out to the Region and us. And we will resume the CIUs, CLI and the CIC classes as we can when we are able to do so with guidance from the State. And then we will just move forward with those things so if there is any questions at the agency level please reach out to the Region and they will direct you.

And that's the end of my report. Thank you, Rich.

MR. PARRISH: Thanks very much, Dave. And you got to get your agencies on the HCS account. You can validate who's been extended, you know, everybody has been, but you can go on there and printout a document. And that's how they're going to start sending information so every agency needs to get the HCS account.

Thank you. Next stop is REMAC.

Dr. Papish?

DR. PAPISH: Hey, everyone. Happy EMS week. I don't have any major report. The only thing that I wanted to bring back to the

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agencies, the only thing I was going -- I wanted to people to bring back to their agencies that ED volumes across the entire Hudson Valley Region are currently down between 35 and 55 percent in all EDs so there is ample capacity to evaluate patients. I know we discussed the pandemic protocol and advisory, but I would keep that in mind when thinking about that and enacted that and utilizing medical control if you are unsure as to whether to transport or not transport somebody based on that. That's all I got.

MR. PARRISH: Along those lines, Dr. Papish, at our facility the people that we are seeing are a lot sicker because they have elected not to come into the facility and now when they are coming in, they are pretty sick. Our acuity levels have gone way up.

DR. PAPIH: Yeah. I think that's true everywhere. It's really -- I mean, besides -- not just the coronavirus, but the public perception of their mortality from the coronavirus has really caused more mortality. It's pretty interesting times.

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MR. PARRISH: Thank you. All right, protocol meeting? Anything on that?

MR. HUGHES: Not at this time. The next protocol meeting is going to be May 26th. We have looked at the cardiac arrest protocol again to take a look at it and see if we can make it flow a little smoother. And Mike Benenati has created a flow chart that makes it flow very smoothly. So we are going to look at that and see if it's something we are going to distribute out. That's really the only key thing we have happening.

The other thing is, there is the REMAC meeting scheduled for June 1st.

MR. PARRISH: Okay. And they are both going to go by Zoom?

MR. HUGHES: Yes. Yes. Actually the protocol committee has been meeting by Zoom for almost a year now. It was a two hour meeting and some people drove an hour and a half to a two hour meeting so they spent three hours on the road to be in the office for two hours. But it seems to work very well for us as a committee to do it as a Zoom

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meeting. That's really how we started using Zoom and has enhanced our skills a bit.

MR. PARRISH: Thank you. All right, Glen, transportation?

MR. ALBIN: Really nothing to report other than that -- you know, what Bill said about the ambulance thing. But we haven't gotten any paperwork on so I guess when it does I guess B.J. and the boys and I will be meeting on Zoom and see what we have got.

MR. PARRISH: Okay. Public information. Desiree?

Desiree? You were there.

All right, moving on. Policies and procedures. Still look for a Chair for that. All right, so we need to get you involved.

Legislative and bylaws. Tim?

MR. EGAN: I wasn't prepared to give a report. But what I can tell you is right after we were assured that supplements and crossovers and Medicaid payments in general were safe, corona hit, and as everybody knows the State budget deficit ballooned since then. And with what seems to be going to be

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a 30 day review every month, we are seriously concerned in the ambulance industry about this. At the UNYAN level we are very concerned about this and we are keeping a close eye on it. But there have been no legislative meetings other than ad hoc meetings one on one here and there. There's been no scheduled meetings in anybody's district offices or, of course, in Albany. So it's very difficult to get a good read on what's happening other than meetings like this, but we are keeping a close eye on it.

I don't have anything else that I can recall off the top of my head for leg.

MR. PARRISH: I didn't want to put you on the spot, Tim, but seeing Albee wasn't there you usually have a pretty good handle on what is going on. Thank you.

MR. EGAN: My pleasure.

MR. PARRISH: Anything on community paramedicine?

MR. EGAN: You know, I was looking at the numbers -- as everybody's 9-1-1 volume dramatically increased and we were more than

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double at one point, as I believe most people were, our community paramedicine volume stayed very steady until April where it dropped off by more than 50 percent and this month it's even less. So I'm not really sure what the correlation there is, but I can tell you that we've done over -- well over 500 community paramedicine visits year-to-date so our program is still going strong on one side of the county, the other side is pretty much dropped off.

But other than that, I don't really have much to talk about with community paramedicine. We are still keeping our program intact and moving forward.

MR. PARRISH: Awards committee? Can anybody give a report for Kim?

MR. HUGHES: Well, I can tell you that the awards have been pushed back by the State and, therefore, pushed back by us. And awards are due in the office by the 1st of June. We hope to have them shortly. We do have -- Orange County has submitted theirs. I don't believe anybody else has at this

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point. So I know there are some people working on them, but the sooner you get them in to us the better it will be. We'd like to see everybody's, but it's been a busy time and we understand that. But, you know, we really need to recognize people that are out there every day.

MS. FRAZIER: Dutchess County will be submitting theirs this week.

MR. HUGHES: Thank you.

MR. PARRISH: That was Sharon Frazier there.

Nominating committee report?

MS. SAGENDORPH: We got together and made a lot of phone calls and sent some e-mails out to the committee and our slate of officers for this upcoming year will be: President, Dave Grass; Vice-President, Rich Parrish; Treasurer, Denise Montana; Secretary, Nick Trio.

I don't know if you want to open the floor to any additional nominations or go with this group of four people.

MR. PARRISH: Okay, that's your report.

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We will open up the floor on new business for anymore nominations and then elections.

MS. SAGENDORPH: Okay.

MR. PARRISH: Okay, thanks for your report.

Dave, State Council, but nothing there, right?

MR. VIOLANTE: Nary a thing.

MR. PARRISH: Nothing, all right.

Sharon, anything on the Hudson Valley EMS directions and leadership committee?

MS. FRAZIER: No, unfortunately we have not. But I'm sure we will be getting back in the swing of things real soon.

MR. PARRISH: All right, expiring delegates: For Ulster County, myself and Dot Balin, expire in June; Rockland, Tim Egan and Theresa Hamilton expire in June; for Orange County, Ben Conques and Frank Cassanite expire; and for Sullivan County, Mike Bruce and Marc Strauss; and for Putnam County, Matt Bondi. So the Region needs letters either reappointing those folks or their replacements.

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MR. MITZEL: Rich, Tim Mitzel --

MR. PARRISH: Yes?

MR. MITZEL: So Ulster County, we are tracking that. Last week we had setup a meeting, we were going to meet on the 4th of June and the next day the governor extended the order. So we are tracking that and we will get that resolved prior to June 30th when it expires.

MR. PARRISH: Thank you.

All right, so anything else under old business?

All right then, Dee, it's all yours.

MS. SAGENDORPH: Under new business?

MR. PARRISH: Yep.

MS. SAGENDORPH: I present the slate of officers: Dave Grass as President; Rich Parrish as Vice-President; Denise Montana as Treasurer; and Nick Trio as Secretary.

If there are any nominations from the floor would you please let me know?

I'm going to ask, any other further nominations from the floor?

Any further nominations from the floor?

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I need a motion to an accept these officers for the upcoming term and as -- the Secretary can cast one ballot.

MR. KNOBLOCH: I make the motion, Israel Knobloch.

MR. PARRISH: Who is the second?

MR. ALBIN: Glen Albin.

MR. PARRISH: Glen Albin.

All right, all in favor?

ALL: Aye.

MR. PARRISH: Any negatives? Okay, thank you.

And thanks for your support. It's been a good run for me. I've enjoyed working with you. I'm not going anywhere. I'll be there to support for Dave and work in the background. Thanks, it's a good group to work with.

MS. SAGENDORPH: Rich, I just want to thank you for your leadership. When I first started coming to the Council it was good to see a familiar face because I didn't really know too many of the others at that time. So it was really good to see you there heading

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us. Thank you for your time.

MR. PARRISH: It's something I enjoyed doing.

All right, a couple things before we move on. Bill talked about the awards. Guys, come on, you know, this is our opportunity to recognize our cohorts and let's not let this pass. This is giving us a lot of exposure. People that didn't know what EMS was and we're out there, you know, sorry to say, folks, passing away, hitting the major news, but people still don't know we are not an essential service and we are not mandated to be there. One of the things -- and I brought this up at the EMS Task Force -- is we got to find a way to build on this. You know, our name is out there and hopefully people now realize who we are and what we are doing. We've got to come up with a way to build on this, you know, and get EMS the recognition it deserves.

MR. ALBIN: Just a comment. We built a lot of goodwill up, you know, because we were responding, doing what we needed to do --

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Glen Albin, by the way -- we definitely need to get the essential service designation. I don't know how they are going to do it, but we need to get that. Counties and towns and villages need to understand that they need to fund us as an essential service so that when pandemics, floods, natural disasters, whatever you want to call it, come by in your communities there is an essential service known as EMS that is going to respond to that disaster or pandemic.

MR. PARRISH: Essential service is the front lines of healthcare.

MS. SAGENDORPH: And -- Dee again. I have been doing this for over 45 years and I'll say this, my neighbors will call me on the phone or they'll stop by the house and say, is this something I need to go and get checked out? And you give them some advice and then the thing is, they're your neighbors and people that you don't know and have never met before, from an auto accident, I mean, we are the ones who are making sure that they get their treatment, they get transported and

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we also give them some TLC. Because let's face it, having an auto accident, if you ever had one, you kind of really need somebody that is going to be understanding and not holding back. And the thing is. I think it should be an essential service. Now I -- I -- is the UNYAN group working -- I know in the past they were working on this. Are they still working on it?

MR. EGAN: Well, we have discussed it, but the only legislative priority we have right now is retaining funding. I know that SEMSCO took it up -- Dave, was that last year or the year before? Last year, right? And if I recall there was a discussion at SEMAC at which they let it go, or did not pursue it. Do you recall that conversation?

MR. VIOLANTE: Yes, that's correct. That's exactly what happened. They were concerned that if EMS became essential service that they would then have to definitively provide that service to every area in the State and they didn't think that was necessarily possible, or that it would be

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difficult to try and make sure that that happened and that was concerning. Not to say that it's not happening, but that was one of the concerns that came up and they ended up letting that go.

MR. EGAN: The disconnect I have with that argument though was, how would SEMAC or SEMSCO be required to provide that? That would be up to local municipalities, this is a home rule state.

MR. VIOLANTE: Yeah. I think it was from the medical directors of all those variety of agencies and regions that were concerned some of these areas may not be able to accommodate that particular situation.

MR. EGAN: And I think the argument that I've heard, at least in individual conversations with legislators is, if you get that essential service label what exactly does that mean? Does that mean -- in other words it always ties back to money. So who has to pay for that? Who's going to pay for that? I can tell you speaking as a city mayor, I have no issue with that. I would

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step up as a village and say, yeah, we have to pay for that and our local community service couldn't do that and the captain is on this call as well, simply because I get it. But I don't know that a lot of local leaders understand that as well as we all do sitting on this Council, so I guess that comes down to education. But personally I'm behind the -- sorry -- I'm behind the essential service label. I know that Albee is also. And if and when we do get a legislative agenda together at the UNYAN level I'm sure we'll be discussing it again, it does come up every year when we set our legislative priorities, I can tell you that.

MR. PARRISH: My suggestion is, you know, talk to your county -- your local supervisors. They've got to be on board because, you know, one of things I sit on -- because of COVID I sit on the county phone call every morning -- and some of these supervisors, their comments about how am I going to get an ambulance there to do this and I'm sending so and so to this ambulance

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and they have no idea what the ambulance service in their town actually does for them. And we have to start educating them at the local level and build it up to the county level.

MR. EGAN: I can tell you this, Rich -- I was just going to say, I can tell you this, Rich, that if the local leaders are not mandated, if their feet are not held to the fire to fund EMS, they are not going to do it. We are very fortunate in Rockland County to have local municipal funding, but I live in Orange County -- as do a lot of other people here -- and very few municipalities are willing to step up and fund EMS. And I think, personally, partly because they are not mandated to, their feet are not held to the fire to do that and maybe that's what needs to happen. That's one of the reasons I'm behind essential service.

MR. VIOLANTE: This point was one of the major findings in the Dutchess County EMS Task Force that was done a number of years ago and onto the regional task force, where

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local leaders truly that are not involved just do not understand. And that's one of the continued findings that is in the literature that it's incumbent on us to really make sure that those folks do understand what it means and what it would like within the --

(The speaker cannot be understood.)

MR. PARRISH: Okay, that's my parting speech about, you know, where I think we should be headed. I think that EMS Task Force, got a lot of good people sitting there and it's heading in the right direction. I would like to see something built off of that if possible, all right?

Anything else to come forward?

MR. GRASS: Rich, if I might?

MR. PARRISH: Yes.

MR. GRASS: Dave Grass here. First of all, I would like to thank everybody for your vote of confidence. And I'd also like to acknowledge, as has been done before, the leadership that we've had within the Council with Rich's part, he had made it very clear

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that's he's going to be there as a backbone and a foundation to make sure that I don't stumble and fall as I move up through this endeavor, but I do appreciate everybody's vote of confidence. I'll try and keep up the high standards that have been set before.

Equally, I would like to remind those on the call now as you go back to your individual county councils that last meeting this committee and council voted to change the bylaws, which really wanted to hold the delegates and the alternates' feet to helping out to make sure that the Council is successful and require them each to be on a committee and participate in that committee. So as those counties that Rich mentioned before have delegates that are expiring, I would implore you to go back and really think about, are those people participating, are they an asset to your county, and are they an asset to the council? And, please, if they are, reapprove them to come back. If not, maybe some fresh new blood to come back to the Council where we can get this wave of

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appreciation for EMS to continue on. And it's really done -- you know, as you've listened to David and the rest of them through this collaboration of people working together to be able to move the minds of mayors and supervisors and council members as to how important EMS. So I think it starts right here. So I would encourage you to, you know, get your delegates and your alternates to participate in these committees and let's make it the best it can be. Thank you.

MR. PARRISH: Again, going back to the task force, there is a group of folks there that saw an issue, they jumped on it, they started moving it forward, they invited law enforcement. Law enforcement, the folks that came to it, were they appreciative for being part of that group and they had no idea what our exposures were and now they do. So we've got to reach out and educate folks. A lot people don't understand what we do. And I think the task force is an example of what this Council can do. You know, there are a lot of good resources here, people got to get

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involved.

MS. FRAZIER: This is Sharon Frazier, I have a couple of things. Can I jump in?

MR. PARRISH: Sure. It's all yours, Sharon.

MS. FRAZIER: I want to talk about the webinars that we've just recently had. Rich had one over at Health Alliance and we had one last night from Mid-Hudson and the physician's group, Envision, that Dr. Papish is from, set that up for us and it went very well. Rich had a little over 50, I was a little over 20. We were hoping for more, but we didn't get it -- that's okay, maybe next time.

So I wanted to talk to you guys and just see if this is something that we can continue to pursue, or would you prefer as a Region that we go back to the face-to-face CME type setup?

MS. SAGENDORPH: My opinion right now -- Dee Sagendorph -- I think right now, I think the Webinar is what's going to work because we can't get-together. We can't get groups

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of people into the same room without having six feet between them. The webinars actually work really good for me and I think it is because I don't always have a chance to go someplace. That last one that Rich did on the COVID with Dr. Meador, I wrote Rich back, it was an excellent, excellent program. She knew her stuff and I learned so much more about that disease. And -- but I think the webinars are a way for people to get there rather than come to a group of people. When all this stuff passes and goes by and we can get back together, that's good because that way we get to see a lot of our friends in person. But the other thing too is for now, I think the Webinar is the way we have to go.

MR. PARRISH: So the Webinar that we hosted, you can go to Webinar I was very impressed with that program, you can preregister. At the end of it I got a report back. If you put your screen in minimal, it logged it. I knew if you stayed there for the whole 92 minutes, or if you only stayed on for 40 minutes. Very impressed with it.

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And the report it generated, I didn't have to generate any extra paperwork. I sent it to Karen and Karen had everything she needed to do it. And I think that in the future, yeah, I'm going to -- when possible do stand ups, but also do the -- go to Webinar because I had people there from Westchester, Grahamsville, people that would not have driven I think that's the plus of it.

MR. VIOLANTE: Hey Rich, when you are going to do a stand up, let me know. I would like to go to that.

Sharon, I think it's a good mix to do both. For the people that are able to get there, that's great for some of that face-to-face time. And as Rich and others have said, if you can't make it out, you can't get there, your schedules just conflict, or you can't drive however long, having it available on Webinar works really really well.

MS. FRAZIER: Yeah. And the presentation is recorded so they are able to retrieve that if they want to share it with a

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group and pass the education on. It just worked out really well. I thought it was a great great choice then nothing, you know.

The other thing I wanted to talk about was Dutchess County EMS Council wanted to do something for our EMS providers. With everything going on we wanted to kind of recognize them, we kind of bounced things off and came up with designing an EMS provider T-shirt from the County. What we did it have one of our member's daughter actually designed it and then got in touch with a T-shirt company and we have got it available for order. If anybody is interested, it says Dutchess County Council on the front and then has a really nice kind of thing on the back for the EMS providers. So if anybody is interested, please reach out to me. I can get your name and put in on order for you or whatever you would like to do. I was going to try and share the picture of the shirts tonight, but I couldn't get it.

MS. SAGENDORPH: Thank you, Sharon.

MS. FRAZIER: You're welcome.

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MR. PARRISH: All right, if nothing else --

MR. HUGHES: Rich, can I interrupt you for one minute?

MR. PARRISH: Sure.

MR. HUGHES: I just want to offer to anybody that is out there, if they are having a problem getting a videoconference together, or need our help in anyway, or to set it up for you so you can have the meeting that you need to have, get in touch with us. We will work with you or we will sponsor it for you. So I wanted to let you know we are here if you need that type of technology, we can help with it. That's all.

MR. PARRISH: And it's obvious, you know, they know what they are doing. They set this up, this is I think one of our better organized meetings, not a lot of background noise. And hopefully -- I believe it's Yvonne -- you could get everything that you needed? She's not saying anything.

But I think everything went well tonight. Hopefully if you have any other

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comments about it, send it to Bill or myself.

If not, nothing else coming forward,
there is motion in order.

MR. VIOLANTE: Rich, I'd just like to
say, thanks for all your time and effort over
the years, we all really appreciate it.

MS. FRAZIER: Yes, thank you.

MR. MEDDAUGH: -- Albee wasn't on
tonight. They did a celebration at the
government center here highlighting EMS week
with EMS, we had all the trucks there, EMS
trucks all over the place, so keep an eye on
the Spectrum news tonight, you might see a
little bit of what went on.

MS. FRAZIER: Nice.

MR. PARRISH: Guys, thanks for the kind
words. And this is something I -- this is my
passion so -- I enjoy what I do. Thanks for
your support.

And, again, who's making that motion?

MR. VIOLANTE: That will be me. Motion
to adjourn.

MR. PARRISH: David. Second?

MR. KNOBLOCH: Second, Israel Knobloch.

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MR. PARRISH: All right, guys.

Thanks --

MS. SAGENDORPH: Happy EMS week.

MR. PARRISH: -- have a good week.

(Whereupon the meeting ended at 8:23
p.m.)

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THE FOREGOING IS CERTIFIED to be a true
and correct transcription of the original
Stenographic minutes to the best of my ability.



Yvette Arnold

