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Index
Observations & Recommendations
A Comprehensive Review of Emergency Medical Services
Prepared For the
Town of Northampton New York

While this report identifies issues where emergency medical services in Northampton need improvements, **there is NO question about the fact that the EMS VOLUNTEERS in the Northampton Ambulance Service have dedicated thousands of hours to the Northampton Community. They have done so risking their own lives, health and safety for the people of this community.**

Thank you to all of the dedicated and caring Volunteer Emergency Responders who serve in the Northampton Ambulance Service. They are dedicated and caring volunteers serving their community as emergency responders.

Observations and Recommendations Summary by page	report page reference
<p>Observation 1: Review of NAS ambulance arrival times as compared with recognized generally accepted standards of care clearly demonstrate that in the Northampton Ambulance Service’s current system, conditions exist that create a climate where <u>a certain percentage of patients may not survive</u> because emergency medical care <u>failed to arrive or initiate care within the recognized time window of patient survivability.</u></p>	10
<p>Specific Recommendation 1: The primary issue that must be resolved <u>immediately</u> for Northampton EMS is to assure the community that when people need emergency medical assistance that help will arrive promptly with trained and equipped personnel to initiate lifesaving actions within the survivability window as shown in the Generally Accepted Benchmarks, Standards, Goals and Objectives section of this report.</p>	10
<p>Specific Recommendation 2: The Town and Northampton Ambulance Service should <u>IMMEDIATELY</u> initiate a <u>24/7 Staffed On Duty EMS Fly Car</u> for all EMS responses when there is not sufficient staffing available to staff an On Duty Ambulance. The On Duty Fly Car would respond to all EMS calls with a medic trained and equipped to initiate lifesaving efforts until such time as a properly staffed ambulance can arrive to provide enhanced treatment and transport to a medical facility.</p>	10
<p>Specific Recommendation 3: The Town should <u>IMMEDIATELY</u> provide NAS with a 4 wheel drive vehicle with proper emergency lights and markings to identify it as an EMS Fly Car. The policy for the Fly Car assigned EMT should assure that said vehicle remains within the jurisdiction at all times it is on duty. The assigned EMT should be able to utilize this vehicle as they would their own private vehicle while staying within the NAS response district and remaining immediately available to respond.</p>	10

Strategic Recommendation 1: The primary goal for planning for all Emergency Medical Services must be to assure that properly trained and equipped emergency responders arrive at the scene able to initiate patient care within nationally recognized response time windows for successful patient survival.	<u>10</u>
Specific Recommendation 4: The Town should establish policies and procedures for regularly monitoring EMS response times, services, staffing and patient outcomes.	11
Specific Recommendation 5: The Strategic Planning Committee shall be community driven and comprised of Nine (9) members. The committee should include: two (2) active emergency medical responders; One (1) Representative from the fire department serving Northampton; Two (2) elected members of the Town Board and the Village Board; and Four (4) citizen members who have no ties to either of the community emergency services. Those citizen members should be selected from tax payer residents, leaders of the business community, the school district and the general public. The representatives from the ambulance company and the fire Company should be elected by vote of the active emergency responders in each company. No citizen member of the Strategic Planning committee should also be a current active emergency responder.	11
Specific Recommendation 6: Within 1 month of the creation and organization of the Emergency Medical Strategic Planning Committee that committee should create necessary Operating Practices Review and Planning Committees. Those Operations Practices & Planning Committees should be composed of active emergency responders with experience in the specific subject matter assigned to that committee and report to the Strategic Planning Committee.	11
Strategic Recommendation 2: The Town and NAS together must assure that all emergency medical services are operated under the policies and regulations established by the NYS Department of Health.	<u>11</u>
Strategic Recommendation 3: The Town and NAS must assure that all ambulance responses comply with NYSDOH regulations for EMT Staffing Standard for Voluntary Ambulance Services and that the Fly Car staffing is part of that response staffing.	<u>11</u>
Strategic Recommendation 4: The Town Board should promptly create a broad community-based Emergency Medical Services Strategic Planning Committee to address the findings and recommendations in this report.	<u>11</u>
Strategic Recommendation 5: The PRIMARY goal of all planning efforts must be to address safety for the people in the community and all emergency responders.	<u>11</u>

Strategic Recommendation 6: Town, Ambulance Company and Community leaders should work together to identify members of the public who are not currently members of the Emergency Medical Services but who have the knowledge, skills and abilities to assist in the review and development of a successful EMS administration.	<u>11</u>
Observation 2: This study did not include a review of any other emergency service. However, it must be noted that logically many of the findings in this report concerning service demands and volunteer staffing for emergency medical services may also apply to fire and rescue services. Certainly communities around the world both large and small have seen the benefits of merging EMS and Fire Rescue services.	12
Specific Recommendation 10: The findings and recommendations of the Operations Practices & Planning Committee(s) must be reviewed and approved by the Strategic Planning Committee and the Town Council before implementation.	12
Specific Recommendation 7: The total membership of the ambulance company must be encouraged to be involved in the planning and development of the new and revised administrative and operating structures of their Emergency Medical Services.	12
Specific Recommendation 8: The Operating Practices Planning Committees should review and address all issues in this report related to: Staffing, Training, Responder certifications and capabilities, Facilities, Apparatus, Equipment, Logistics, and all other response issues that impact the safety of responders and the community.	12
Specific Recommendation 9: The Strategic Planning Committee should assign a special committee to review current 9-1-1 protocols and call type classifications that apply to Northampton agencies to assure that each call type received has the proper units and staffing dispatched, or not dispatched, to meet the response goals and objectives established by the committee.	12
Strategic Recommendation 7: The Strategic Planning committee should carefully examine the impacts, both positive and negative, of merging Fire Rescue and EMS services in the community.	<u>12</u>
Observation 3: For the record it is not uncommon for members of an organization such as NAS to not want to meet in a group setting to personally discuss their feelings and any issues that may be sensitive to other members or agency leaders. That is the primary reason why I utilize online surveys and provide my personal email address to the members to gather member input. I did receive that member feedback in the survey and I validated what I received during my site visit.	16

<p>Observation 4: I am aware that some Emergency Responders may not have responded to the Emergency Responder survey. Some responders also may have responded more than once in an attempt to assure that their concerns would be heard. I have made strong efforts to assure that any multiple responses did not cloud results. I also made strong efforts to confirm that what was reported was validated with what we personally observed on site and by comparing other gathered information. Based upon review of all the materials we received and our observations on site, I believe that I had sufficient feedback and information to provide a valid base to evaluate the many important factors that are impacting Emergency Medical service in the Town of Northampton.</p>	16
<p>Observation 5: Unfortunately in my research and observations I have found that many of these basic elements for long term success are weak or missing in the Northampton Ambulance Service.</p>	20
<p>Specific Recommendation 11: The NAS family should immediately work to adopt the four basic elements of successful agencies: Senior Member Roles; We are a Family; Our company is the best; and Training for succession. Each leader and each member must work to assure the long term success of every other member, and the long term success of the Northampton Ambulance Service.</p>	20
<p>Observation 6: Limited information was provided to demonstrate that NAS regularly monitors Effective Response Force time and staffing data beyond the tracking of calls dispatched but not responded to by the agency. However, there is a general awareness within the agency of the seriousness of issues that arise from delay in response.</p>	22
<p>Observation 7: The data we were provided with demonstrated that each of these elements is not regularly captured or monitored either in the agency records management system or in the current 9-1-1 records system.</p>	22
<p>Strategic Recommendation 8: The Town EMS Strategic Planning Committee should develop incident specific standards of response coverage policies and regularly monitor benchmarks and baselines for response.</p>	<u>22</u>
<p>Strategic Recommendation 9: We urge the community to establish a program of regular communitywide CPR training for citizens and the installation of automatic defibrillation (AED) devices in areas where large congregations of people are common.</p>	<u>26</u>
<p>Strategic Recommendation 10: Strategic Planning for the delivery of emergency medical services in the community should recognize the nationally recognized standards for delivery of emergency medical services. Survival times for patients are directly impacted by response times.</p>	<u>28</u>

Specific Recommendation 12: We urge the Town of Northampton and its EMS agency to engage the Town or other attorneys qualified to interpret those NYS Department of Health regulations that apply to Emergency Medical Services before implementing actions to address EMS services.	29
Observation 8: NAS has been tracking its own responses to emergency calls for service for several years and is well aware of the fact that it has not been able to respond to many calls for service. NAS also has developed and utilizes a report form to identify the reasons for any non-response to calls for service in its ongoing efforts to identify the problems in its efforts to correct the problem.	30
Observation 9: Review of the completed Responder's Report forms at NAS demonstrated that the primary reason why NAS has been unable to respond to some calls is that only one person responded to NAS station. NYSDOH regulations require a minimum of 2 responders on an ambulance including at least 1 EMT	31
Observation 10: Survey responses from the people in the community and from members of NAS itself recognize the high percentage of unanswered call for service. The growing increase in the number of those unanswered calls is unacceptable. The community as a whole wants the problem solved promptly.	32
Observation 11: It must be noted that NO single standalone ambulance service operating a single response unit will ever be able to respond to 100% of the calls for service in their community.	32
Strategic Recommendation 11: NAS and all other EMS agencies must assure that they operate with automatic aid agreements between the agencies and that protocols are in place for emergency dispatchers at the 9-1-1 center to automatically relocate units to assure that there is proper EMS coverage with timely response to all districts at all times.	<u>32</u>
Observation 12: I have been informed that currently Fulton County medical groups have not established the required guidelines that would allow the use of EMD in Fulton County. Local medical expert review is required to establish the EMD guidelines for emergency medical responses. Those efforts should eliminate situations like the example we discovered where an ambulance was dispatched to a person with a tooth ache. We urge the County and the local medical community to investigate and implement the use of EMD for all EMS calls. There will also be a need to review staffing levels at 9-1-1 to assure that EMD can be effectively utilized without creating a negative impact on other emergency dispatching.	35
Observation 13: Review of response records indicates that NAS does not consistently meet generally accepted response time goals. The chart below demonstrates the serious issue of NAS not accomplishing adequate response times for patient survival for cardiac and breathing types of	36

incidents.	
Observation 14: Current records made available by NAS do indicate that the agency does manually track the number of emergency responders who actually responded to the scene. However, those records do not accurately track or indicate when each responder arrived or if a sufficient number of emergency responders arrived on scene. That level of tracking could easily be met if the agency utilized a tool like I Am Responding or in the CAD system.	38
Observation 15: The County 9-1-1 office provided dispatch data for NVAS for the current year to date and 2017-2018. The review of those records and those provided by NAS indicated that there are serious response time issues with ambulance responses being outside of the recognized times for the best survival chances for patients with life threatening medical problems. That fact is currently recognized in County 9-1-1 office policies which direct that GAVAC ambulances be automatically dispatched to all NVAS area EMS calls. The Northampton Ambulance Service also provided us with copies of its response data which showed the same response time issues.	38
Specific Recommendation 13: The operations planning committee should review the type of calls that will be responded to, the type and number of EMS Units and the staffing sent to each type of incident and when that staffing actually arrives on the scene.	38
Observation 16: Only 4 of the responders were reported as having advanced EMT certifications. This low number seriously negatively impacts the agency's ability to provide ALS services	41
Specific Recommendation 14: If NAS wants to provide ALS services it must significantly increase the number of responders who are certified to provide those services.	41
Specific Recommendation 15: The EMS chief and the organization need to promptly establish policies that ensure that the chief will serve primarily as a mentor and teacher, both in the field and administratively, rather than as a "doer". The agency MUST take advantage of the fact that the chief is a singularly valuable resource for assuring the future success of NAS.	44
Specific Recommendation 16: NAS should initiate a policy to regularly conduct Post Incident Reviews with the responders to incidents. The findings of Post Incident Reviews should form the basis for modifying operations, policies and practices to improve future incident operations.	45

Specific Recommendation 17: Patient care reports need to be automatically linked to online dispatch data to assure report accuracy and to reduce the time required to complete the report.	45
Observation 17: The fact that 15 out of 28 emergency responders were identified by the agency as being over 50 years old demonstrates that at any time the total number of volunteers in the agency could be drastically reduced as those volunteers retire, age out or are medically unable to perform their duties safely. The agency reported only 6 members under the age of 30. That number is less than 46% of the number of responders who can reasonably be expected to leave service.	47
Specific Recommendation 18: The Recruitment, Retention, and Training of New and younger Volunteers must be a priority for agency leadership.	47
Observation 18: It was disturbing to see that over 66% of the emergency responders to the survey reported that they had never had a physical examination to determine their fitness for duty.	48
Specific Recommendation 19: NAS <u>MUST</u> establish a policy that requires every emergency responder to have a regular annual fitness for duty physical.	48
Specific Recommendation 20: Recruitment efforts must be focused primarily on new Volunteers under the age of 40 while also incentivizing retention of all Volunteers who are medically fit to serve including those over the age of 50.	48
Specific Recommendation 21: Recruitment and retention efforts must assure that they are inclusive of women and men.	49
Specific Recommendation 22: There must be a regular ongoing review and monitoring of Volunteer staffing Availability, Response Capabilities and Training to assure operational and emergency responder safety.	49
Specific Recommendation 23: The use of the County-provided I Am Responding software program will provide the data needed to review both the number of Volunteers who are available to respond and those who do respond to each incident.	49
Observation 19: The number of volunteers attending company training is generally below 50% of the number of volunteers reported by NAS. We did not see any report of company training for 2019 during January, February, March, or April. Training must be regularly scheduled and conducted at times when the majority of responders can attend.	52
Specific Recommendation 24: NAS needs to examine and adjust its training schedules to assure that all members can attend training on each topic. That may necessitate multiple times for each class.	52

Observation 20: Northampton Ambulance Service generally does not have any On Duty Volunteers in their station. There is also no tracking or group knowledge of who is currently available to respond to incidents prior to the notification by the County 9-1-1 center that there is a call for service. It appears that the only time anyone knows who is going to respond to any emergency is after responders acknowledge the dispatch to 9-1-1 or when the handwritten response report is prepared after the event has been completed.	53
Specific Recommendation 25: The Operations Planning Committee should establish a system that tracks who responded to every incident, when each responder arrived, and the qualifications of each responder, to allow for a regular analysis.	53
Specific Recommendation 26: The Town and the County should require the use of the IamResponding.com system tool that allows all Volunteers to regularly post their availability to respond prior to the report of emergencies.	55
Observation 21: I was informed that some current members of NAS may not currently have cell phones and that there are areas in the community where cell service is poor or nonexistent.	56
Specific Recommendation 27: All emergency responders should use IAR to record their availability to respond AND their actual response to each incident.	56
Specific Recommendation 28: The ambulance company should immediately coordinate with the County 9-1-1 center to institute a policy that requires all Volunteers to log and maintain the status of their availability to respond in the IamResponding.com program.	56
Strategic Recommendation 12: The Town should assure that every active Volunteer has a cell phone that is able to utilize the IamResponding.com program.	<u>56</u>
Strategic Recommendation 13: The Town should work with Fulton County to increase and improve cell service community wide. This would benefit the entire community but is of vital importance to Northampton's Emergency Medical Services.	<u>56</u>
Observation 22: The on duty time demands of staffing solely with Volunteers speak for themselves. The community must ask itself: What volunteers can afford, or be expected to, donate an excessive amount of time in free service to their community when faced with the regular demand of family life and work?	58
Specific Recommendation 29: To assure Volunteer coverage with or without On duty staffing the must be an ongoing recruitment and retention efforts	58

Observation 23: Currently there are not a sufficient number of qualified and available volunteers to cover the ambulance response staffing needed to assure proper timely response in accordance with recognized response times and levels.	59
Specific Recommendation 30: Planning Volunteer Staffing Schedules must also include scheduled training for Volunteers. All schedules must be created to ease the conflicts between a Volunteer's personal life schedule and the needs of the Volunteer service.	59
Specific Recommendation 31: The Fly Car would operate 24/7/365. Fly Car Time slots unable to be covered by a volunteer would be covered by paid staff. Those staffing costs are demonstrated in the Business Organization section of this report and in the provided MS Excel workbook.	60
Strategic Recommendation 14: NAS should operate staffed, primarily as an On Duty Fly Car response agency with an On Duty Volunteer assigned to that unit for prompt timely response. The current ambulance company already dispatched to every incident, GAVAC, would continue in its current role responding for ALS and transport.	<u>60</u>
Observation 24: The 2018 ambulance is a fully equipped unit with the modern tools and equipment needed to provide excellent service in the community. The placement of equipment, including monitors, is evidence of a great deal of planning efforts by the agency to assure that the unit will allow emergency responders to operate efficiently and safely while enroute to medical facilities	62
Observation 25: NAS currently operates out of a former equipment garage that does not provide the facilities emergency medical services and emergency responders need today.	65
Observation 26: There are no designated facilities for cleaning equipment and PPE (Personal Protective Equipment) in the NAS station. There are limited facilities that would allow emergency responders to shower and clean up. These conditions create a health hazard of bringing contamination from the scene into responder's vehicles and homes and responding to subsequent incidents with equipment that is not properly cleaned.	65

<p>Observation 27: There are no facilities conducive for on duty staffing. The NAS station does not have a designated lounge area with the types of facilities that would encourage members to come to the station for duty beyond routine response work or training activities. The NAS station does not have bunk room facilities that would facilitate night time staffing or facilities for staffing the station during long term events. While there is a shower in the current station, it is located directly off the meeting room and does not really provide an area where emergency responders can shower and clean up after an incident. There are no facilities where responders can privately change clothes after an incident. There is no equipment where responders could wash their contaminated clothing before leaving the station.</p>	<p>65</p>
<p>Observation 28: Addressing each of the facility issues in this report remain the same whether the community elects to transition to a Fly Car operation or stay as an ambulance operation. If the Fly car option is selected, there must be a place to park that vehicle inside the station or in another facility that is climate controlled.</p>	<p>65</p>
<p>Specific Recommendation 33: The ambulance station should be equipped with facilities that allow emergency responders to wash and clean off contaminants from their bodies and their all of their equipment before leaving the station.</p>	<p>65</p>
<p>Specific Recommendation 34: NAS must have facilities that will permit the successful establishment of scheduled station duty time and/or in district available for duty time.</p>	<p>65</p>
<p>Specific Recommendation 35: The Town should provide facilities and policies that encourage people to be in the station “On Duty” awaiting calls. Those facilities should include a lounge room, kitchen, male and female bathrooms with showers, and bunk rooms or other sleeping spaces.</p>	<p>65</p>
<p>Specific Recommendation 36: If the Village of Northville does decide to replace or modernize their current fire rescue station, the Town and the Village should work together to assure that the new facility can accommodate the needs of both the Village fire rescue company and the Northampton Ambulance.</p>	<p>66</p>
<p>Observation 29: There is land available adjacent to the Current Village Fire station. This could accommodate the facility needs of both Fire Rescue and EMS services, and perhaps other public functions as well. The architectural design of a new structure could reflect either the historic homes across the street or the historic commercial structures on the same side of the street no matter what the station design might be</p>	<p>67</p>

Specific Recommendation 37: Until such time as the Village and the Town can come to an agreement regarding combining fire rescue services and EMS at the same facility, the Town can go forward with either manufactured housing or a mobile home facility option at the existing site of the NAS station. This immediate action would promptly provide the much needed station facilities for NAS. Expended funds for this action could be recouped by selling that facility after a new station is available.	68
Observation 30: Our research has shown a decline in student populations with a decrease of more than 2,400 students in Fulton County schools and 110 students in the Northville schools, in all grades combined, between the years of 1999 and 2019	70
Observation 31: The school population charts reflect a shrinking and ageing community. In a Volunteer based emergency service it is the young people from the local schools who would be expected to join the Volunteer Ambulance Companies as their families did in previous generations.	70
Observation 32: It has been reported in the local media that there recently have been a number of ambulance agencies that have ceased operations either totally or sporadically. Those closings were the result of both funding issues and staffing issues. EMS staffing, costs, and response capabilities are a regional and statewide problem that must be addressed. The Town of Northampton is to be commended for its efforts to address this serious issue. The maps below reflect our findings during the time of this study, but may contain information about agencies that are still listed with NYSDOH but no longer serving in the region.	71
Observation 33: Greater Amsterdam Volunteer Ambulance Corps GAVAC is dispatched on all NAS calls. If NAS has a sufficient crew, GAVAC is cancelled if NAS has only a BLS crew, GAVAC continues for ALS support. If NAS is unable to respond, GAVAC takes the total call. GAVAC keeps a minimum of three to four ambulances available for Fulton County calls. GAVAC is the primary EMS agency for the rest of Fulton County plus all of Montgomery County.	73
Specific Recommendation 38: All possible efforts must be made by the leaders of NAS & Edinburg Emergency Squad and the leaders of the two communities to assure that there is a harmonious relationship between the agencies and their members. Operational Merger of these two independent agencies should be seriously examined to assure both communities of 24/7 EMS coverage.	74
Observation 34: The people of this community clearly see the need to have effective and efficient EMS services. They certainly understand that while taxes may be required to support those services, the most cost effective method is to distribute the costs over as wide a tax base as possible.	80

<p>Observation 35: The agency reported that there is no Strategic Plan for EMS. There is a clear need to address that issue as noted in this report. The fact that the Town has commissioned this study indicates that the Town needs to establish and manage that strategic plan.</p>	81
<p>Observation 36: For the record, this consultant is totally opposed to any practices that ask VOLUNTEER Emergency Responders to also participate in fund raising activities to support a public service where they already donate their time and energy providing much needed services to the community. <i>Does the community ask the snow plow operator to raise the funds needed for buying and operating their trucks and equipment?</i></p>	83
<p>Specific Recommendation 39: While there are concerns that billing for EMS services may decrease donations, the reality is that charging for EMS services is a common practice in the industry and charging for services should be part of the funding formula in Northampton.</p>	84
<p>Observation 37: It must be noted that the following mil rate impact chart demonstrates the combined Town of Northampton and Town of Edinburg Taxable Values as found online. The Town of Edinburg and its ambulance service were not part of this study and are being used only as an example of possible mil rate impacts of consolidation of the services in both Towns. I choose to use this example because both communities and their EMS are located very close to each other. If EMS was to be combined, it would provide prompt response in both communities while expanding the pool of available volunteers</p>	86
<p>Strategic Recommendation 15: Regional Strategic Planning efforts should examine the number of Ambulances and fly cars needed in the planning area to assure that emergency medical care reaches each potential patient in time to initiate treatment within the recognized accepted guidelines for patient survival and the tax mil rate costs for providing those services.</p>	<u>87</u>