

## **Ambulance District Meeting Minutes 10/9/14**

### **7:00 PM, 16 Croton Avenue, Conference Room**

Ossining Town Supervisor Sue Donnelly, Chair Robert Seebacher, OVAC Captain Nick Franzoso, Richard Wishnie, Village of Ossining Village Manager Richard Leins, and Dr. Emil Nigro were present. Ambulance Chief Michael Garcia of Briarcliff Manor and OVAC member Joseph Bucchignano were also present. Town Councilman Geoffrey Harter, Village of Ossining Trustee Bob Daraio, Village of Ossining Mayor Bill Hanauer, William Hamilton, Ronald Dornau, Town of New Castle Administrator Jill Shapiro, Village of Croton Village Manager Abe Zambrano, Director of Croton Department of Emergency Management Dick Nagel, Croton Chief of Police Anthony Tramaglini, Village of Croton EMS Captain Bill McCabe, and Town of Ossining Attorney Wayne Spector were absent.

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Chair Seebacher calls the meeting to order at 7:10PM. The first order of business is to approve the minutes from the prior meeting held on April 10<sup>th</sup>, 2014: the group reviews the minutes, Mr. Wishnie makes a motion to accept, seconded by Supervisor Donnelly, and the minutes are accepted unanimously.

Captain Franzoso begins discussion of the statistics for the second quarter of 2014, which Captain Franzoso confirms has been OVAC's busiest quarter ever. The 1<sup>st</sup> page shows the breakdown of call locations, which is consistent with past trends in terms of allocations to each municipality; out of a total of 729 calls, the Village of Ossining holds the majority of calls at 577, not including the fly car. The 2<sup>nd</sup> page shows a breakdown of call type, which is fairly consistent across the three months with an increase across all categories. Dr. Nigro notes the high numbers for "ALS Treatment No transport", and Mr. Bucchignano explains that this is usually patients with hypoglycemia- once the staff arrives and stabilizes the patient, they do not wish to go to the hospital; these calls are not billable, as OVAC can only bill when a transport occurs. The 3<sup>rd</sup> page shows a line graph of the second quarter call volume over the past 8 years, which indicates an increase of 11.8% over 2013 and a 150.9% increase over the period studied.

The 4<sup>th</sup> page details dispersion of mutual aid for the 2<sup>nd</sup> quarter- of a total of 23 calls, 12 went to Briarcliff Manor, 6 to Croton, 3 to Sleepy Hollow, and 2 to Cortlandt. The 5<sup>th</sup> page shows a breakdown of what mutual aid has come to Ossining from other communities, with a total of 25 for the quarter- 14 from Briarcliff (including 4 cancelled) and 11 from Croton- the 6<sup>th</sup> page itemizes the calls for which mutual aid was used by OVAC.

The 7<sup>th</sup> page shows a bar graph for the 2<sup>nd</sup> Call in District Within 30 Minutes numbers for 2014 Q2 , which totaled 218 of the 729 calls for the quarter. The secondary calls would have required mutual aid from other communities if not for the availability of the 2<sup>nd</sup> ambulance. The 8<sup>th</sup> page is a bar graph showing an hour-by-hour accounting of when calls come in, again showing the peak times between 8AM and midnight with fewer calls overnight.

The 9<sup>th</sup> page is a line graph measuring response times for Q2, with 95.5% of calls responded to within 9 minutes, with the majority of calls having been responded to between 3 and 4 minutes.

The 10<sup>th</sup> chart lists all of the calls with a response time greater than 9 minutes, including call date, location, time, reason for delay (if there is one) and Job ID number. The 11<sup>th</sup> and final page maps the location of these calls. Dr. Seebacher asks for a graph that depicts the 7-8, 8-9, 9-10 and 10+ minute response times for the next meeting, and also notes that there are several instances where there is no reason indicated for the increased response time, and suggests that perhaps OVAC get a survey of patients who tried to see their doctor earlier in the day before calling the ambulance as a last resort. Mr. Wishnie says that the hospital should provide the assets to properly conduct the survey and lessen the number of calls. Mr. Wishnie also thanks Captain Franzoso for adding further detail to these reports, and is pleased to see that the numbers appear to be very efficient.

The 3<sup>rd</sup> quarter statistics begin with a breakdown of call locations- out of a total of 685 calls, 527 went to the Village of Ossining, 119 to the Town of Ossining, 12 to New Castle and 27 in Mutual Aid, which shows a decrease from Q2 but an increase from 2013 Q3. The 2<sup>nd</sup> chart shows the breakdown of call type, the bulk of which come from BLS and ALS calls, as is normal for OVAC. An adjustment to the electronic recording system allows for more detail to be used in differentiating call type in these categories. The 3<sup>rd</sup> page shows that, across the past 8 years, call volume in Q3 has continued to increase- the volume is 14.4% higher than 2013 Q3 and 63.1% higher across the 8 years graphed.

The 4<sup>th</sup> chart shows outgoing Mutual Aid for the 3<sup>rd</sup> quarter- out of 27 calls, 19 went to Briarcliff, 7 to Croton and 1 to Sleepy Hollow. The 5<sup>th</sup> chart shows the incoming Mutual Aid- out of a total of 16, 11 were from Briarcliff and 5 from Croton, including a total of 6 cancelled between both- the 6<sup>th</sup> page displays the dates, times, locations and nature of call types for all incoming mutual aid. The 7<sup>th</sup> page demonstrates the 2<sup>nd</sup> call in district- out of 685 calls, this accounts for 178 or 26% of calls, while the 8<sup>th</sup> page shows the hour-by-hour of incoming calls, a trend which the Captain reports is largely unchanged from quarter to quarter.

The 9<sup>th</sup> page shows a bar graph of response times for Q3, noting 80.9% of calls responded to in under 6 minutes, and 95% in under 9 minutes. The 10<sup>th</sup> chart lists the calls with a response time over 9 minutes, indicating Job ID number, date, time, location, response time and reason, with the final page mapping out the locations of these calls.

As far as the structure and budget for OVAC, it is reiterated that there will be no Chief in 2015, which allows OVAC to have 4 full time EMTs with a slight increase to their hourly rate. Captain Franzoso reports that having 3 paramedic supervisors has been great in terms of covering the flycar and the office work. The Workers Compensation expense has gone up a bit due to three big claims in 2014, but OVAC hopes to purchase new power lifts for the ambulance to help reduce injuries and this expense going forward. Both Croton and Briarcliff have this equipment, which is basically a hydraulic and battery operated system that holds the stretcher in the ambulance. Captain Franzoso mentions that it also more securely fastens the stretcher to the ambulance in case of an accident. The equipment costs around \$25,000 for one lift with an additional \$1500 or so for installation. As for the overall budget, OVAC is asking for \$627,677, which falls within the 1.66% tax cap and allows them to operate up to their standards. Mr. Wishnie makes a motion to accept, which is seconded by Dr. Nigro. The Board approves the budget, and Mr. Wishnie comments that he hopes that Briarcliff will join MHAD in 2015.

The discussion turns to the “Ebola Advisory” and Mr. Bucchignano distributes information about the training OVAC members are receiving to prevent the spread of ebola, in the event that they encounter a patient they suspect has been exposed. He explains that ebola is not a new illness, but is simply new to the US, which is why it is suddenly getting so much attention in the media. OVAC members undergo exposure control and respiratory protection training, which is regularly updated to comply with new standards. Staff is trained to recognize symptoms from the time a call comes in, and can be prepared with the proper personal protective gear, following all CDC specifics. There is also written protocol in terms of how to proceed, including the usage of Level C PSHA/PESH PPE and how to notify the Westchester County Department of Health or the Center for Disease Control. After the initial contact, the ambulance can be cleaned and disinfected more simply due to the usage of pre-cut tarps that fit over the inside of the ambulance in cases of suspected highly infectious disease. There is discussion of putting together a Public Service Announcement, along with Phelps, to share this information with our residents and make sure everyone is getting factual information about this illness and our level of preparedness. Mr. Wishnie brings up the alleged case in Westchester, which was later ruled out, and Dr. Nigro explained that the patient had a story that would be consistent with ebola transmission, that the staff took it seriously and that it was a good drill.

The next meeting is scheduled for Thursday, January 15<sup>th</sup> at 7PM, where the 4th Quarter and entirety of 2014 will be discussed and statistics will be presented. Meeting adjourned at 8:20PM.