North Shore Paramedics Go Under

*Islip residents could be at risk*

By Joe O’Halloran

Streaks of red, blue and amber lights cut through the darkness as sirens pierce the early morning air. An ambulance races to a nursing home to treat an elderly man who has been seizing uncontrollably. But the crew on board doesn’t have the necessary medications, since emergency medical technicians (EMTs), who make up an ambulance’s response team, can’t administer them. The crew is forced to call in more specialized personnel.

North Shore-LIJ Paramedics will no longer be assisting Islip Town ambulance companies with advanced life support services on emergency calls.

Had this scenario unfolded several weeks ago, paramedics from North Shore-Long Island Jewish (LIJ) Health System’s Islip First Response Program would have accompanied the ambulance to the nursing home and administered the meds, expediting the patient’s recovery. These paramedics, when requested, provided advanced life support services (ALS) to the five volunteer ambulance agencies serving Islip Township.

No longer. Since Labor Day weekend, the decade-old paramedic program is no more, due to a recently expired contract. The loss creates roadblocks for many pre-hospital healthcare providers and could mean a slower response time for Islip residents needing crucial time-sensitive emergency aid, say many of those on the ground responding to the calls, the majority of whom wished to remain anonymous for this story since they are currently employed by the town.
George Raab, a former EMT in the Town of Islip, says the paramedics provided critical assistance to the town’s first responders and their absence would leave a hole not easily filled.

“It’s not a matter of if we want the North Shore paramedics, the fact is we need them for the life-saving services they provide within the community,” Raab tells the Press.

He believes the loss will have detrimental effects to all the town’s ambulance companies.

“The North Shore paramedics are a tremendous asset to the Islip volunteer fire and emergency medical service organizations,” Raab continues. “These medics are able to provide a continuous aide to those calls requiring that extra step in medical care; this absence will seriously hurt all town ambulance corps.”

Others disagree.

Alan Schwalberg, director of North Shore-LIJ’s Center for Emergency Medical Services (CEMS), says plans have been in motion to compensate the paramedics’ departure and will result in a seamless continuance of services.

“We have worked closely with the leaders of the ambulance and fire districts to ensure a smooth transition of patient care within the community,” he explains.

North Shore-LIJ’s Islip First Response Program, based out of Southside Hospital in Bay Shore, began in the fall of 1999 and maintained a fleet of seven response vehicles operated by “highly skilled” paramedics, explains a North Shore-LIJ Healthcare System spokesman.

According to Southside’s Director of Safety and Emergency Services Anthony Pellicone, the paramedics’ contract with the town was set to expire in May, but due to a lack of ALS providers within the town ambulance companies, the healthcare system decided to continue the program through the summer to help with the town’s increased call volume.

And despite the paramedics’ exodus, that volume is expected to continue to rise.

Suffolk County Fire, Rescue & Emergency Services Commissioner Joseph Williams tells the Press the amount of EMS calls will double over the amount of fire calls within the next 10 years—fueled in part, he explains, by the Island’s growing elderly population and increased fire safety education among residents.

Jamie Atkinson, a chief with Sayville’s Community Ambulance Company and president of the Islip Ambulance Chiefs Association, says the town’s Tactical Ambulance program will provide an easy transition for the community’s emergency medical care needs. The program consists of each Islip Town ambulance company providing one ALS provider each day of the week—Monday through Friday, 6 a.m. to 6 p.m., North Shore’s previous coverage—in addition to a second, weekly, ALS medic to assist all the town’s five ambulance companies with calls requiring advanced level of care. It is the first cooperative ALS program of its kind in Suffolk.
“We do not anticipate a significant negative effect on the system,” he said in a statement.

But some responders contend the volunteer-based program will be wrought with service inconsistency, since the providers are no longer paid, full-time, and thus, guaranteed. They argue that the increasing demand of the job will strain the reduced manpower.

One current Islip Town EMT stresses to the Press just how critical the paramedics were to emergency medical services in Islip: “A lot of local EMS agencies do not carry the appropriate medications for certain illnesses as do the North Shore paramedics, and until the protocol is changed so that they do, we need these medics.”

Sam Gangi, a volunteer EMT with the Exchange Ambulance of the Islips, believes that as good a job as the ALS Tactical Ambulance does, it won’t be able to fully replace the assistance North Shore paramedics provided.

“With the paramedics leaving, our job as pre-hospital healthcare providers will be affected in a big way,” he explains. “We were accustomed to having at least one of seven paramedics respond to a scene if needed, and now we won’t.”

“You cannot run EMS in the Town of Islip with three paramedics,” Gangi adds. “These medics are doing an average of 10-12 jobs a day, and that will, if it hasn’t already, take its toll on them.”

An Islip volunteer paramedic put it more bluntly, saying the lack of paid, full-time ALS providers will create gaps in response rates.

“We’re putting our finger on the hose rather than buying a new hose, as it relates to pre-hospital healthcare,” he says.

*Editor’s Note: The author is an active EMT within the Town of Islip.*