Chairperson’s Message

Appreciation is extended to Martin Grillo and his committee for another excellent Volunteer EMS Recognition Dinner, which has become a premier event in New York City as a prelude to EMS week. I also want to extend my congratulations to all the awardees at NYC REMSCO’s EMS Week event.

Another couple of months have come and gone and our comments on the proposed contract for volunteer participation in the NYC 911 System are still being considered by FDNY and its legal staff. This is pretty much the same response FDNY has provided over the last 15 years when agreements and contracts are discussed. From 1994 through 2003 there was back and forth about revision/update of the Mutual Aid Response System (MARS) agreement. After that, it was the 911 Pilot Agreement. In 2009, facilitated by NYC REMSCO, work began on a more formal agreement for Community Based EMS providers. Same idea – volunteer agencies helping with 911 calls – and same response – delay! However, times have changed somewhat with the city’s budget and our NYC Council representatives taking an interest in overall 911 ambulance response times approaching 9 minutes in a number of months this past year. District 4 officers continue to talk to our representatives in an effort to force positive movement from the FDNY. NYS DOH regulations Part 800.21(p)(1) require ambulance agencies to have in place a procedure “to request the response of the nearest, appropriate, available EMS service” and the city’s volunteer EMS providers - 28 independent squads, 5 volunteer fire departments and 3 college squads - are ready, willing and able to fill 911 system coverage voids in their communities.

Installation is progressing of a NYC Department of Health & Mental Hygiene funded Interoperable Radio System to link volunteer squads’ headquarters with NYC REMSCO, FDNY, NYC OEM and other city agencies. We are getting questions about how and when the radio system will be used and when we get answers, we will pass along the information. This project, like several others supplying escape hoods vs. respirators, bunker gear vs. reflective PPE jackets, radiation detectors needing batteries-repairs-calibrations for which contracts have run out, etc., were implemented without involvement or contrary to the needs expressed by the primary stakeholders – the volunteer EMS agencies across the city. I think we all would want to ability for ambulance crews to be able talk to each other but there is no word if this is in any plan.

Lastly, on behalf of the District, appreciation is extended to outgoing officers Fran Serrentino and Marty Grillo for their years of dedicated service. I also want to welcome new officers Linda F. Minervini and Thomas Cacaci.

Ryan
VICE CHAIRPERSON’S MESSAGE

Luckily, we were able to squeeze in the 9th Annual Volunteer EMS Recognition Dinner Dance. Thanks to the last minute donations from New York Hospital Queens, Powell Associates, Mineo Consulting, Dr. Victor Politi, and SeniorCare EMS, we were able to have a successful event with almost 350 people in attendance. The 10th Anniversary Volunteer EMS Recognition Dinner will be held Tuesday evening May 10, 2011 with plenty of surprises in store. We need to start raising funds now to have a successful event. Speak to your local politicians & vendors to see if they can sponsor our event. The 10th anniversary of the 9/11 attack is truly our way to remember and honor our fallen brethren.

At this time, a Regional Emergency Medical Council sub-committee is working on a draft Mutual Aid procedure for EMS services in this region. If you have any comments, questions or concerns, or would like to have an input on this, please contact Marie Diglio, the officers of the council or myself.

I recently attended a community event fundraiser at the Gerritsen Beach Volunteer Fire Dept. It was very heart warming to see the community come out and support their volunteer agency. Now would be a good time to think about what you have done to show your support for your community as well as reminding the community that you are there to serve them. Remember, as the FDNY calls us, we are Community Based Volunteer Ambulance Services. We can provide services that the Fire Department cannot or will not provide our communities. Reach out to your local community leaders and remind them that you are a resource for them and do what we do best, take care of our community.

The most important thing is that we must stick together to reach our goal. Please support the District and try to send a representative to the District meetings.

Have a great summer and stay safe!

Martin

District 4 Officers for 2010-2011 were elected at the 7/8/10 meeting:
Chairperson - Ryan Gunning, Glendale VAC
Vice Chairperson – Thomas Cacaci, Glendale VAC
Secretary – Janet Perry, Emergency Medical Rescue
Treasurer – Nancy Ehrhardt, Glen Oaks VAC
Financial Secretary – Linda F. Minervini, Glendale VAC
Director – Charles Hummel, Glendale VAC

REGIONAL EMS COUNCIL OF NYC

Officers for the two year term beginning 7/1/10 are:
- Chair: Joseph Marcellino, MPH, Flatlands VAC
- First Vice Chair: Al Rapisarda, Midwood Ambulance
- Second Vice Chair: Vincent Barranco, Jamaica Hospital EMS
- Parliamentarian: Yedidyah Langsam, PhD, Brooklyn College EMS
- Secretary: Mordechai Lax, Brookdale Hospital EMS

At-large Seats:
- Reelected for a four year term ending 6/30/14:
  - Ralph Cefalo, Whitestone VAC
- Elected to four year terms ending 6/30/14:
  - Robert Crupi, MD, Flushing Hospital & Flushing VAC
  - Michael Vatch, SeniorCare EMS & Hatzalah VAC
  - Jerold Gelbard, FEMA & Glen Oaks VAC

Leaving NYC REMSCO on the expiration of two terms are Jeffrey Horwitz, DO and Nadine Levick, MD

Yedidyah Langsam, PhD, EMT-P has been appointed NYC REMSCO’s representative on the NYS EMS Council. He replaces Nancy Benedetto who served two terms.

Regional nominations for NYS DOH awards to be presented at VITAL SIGNS have been submitted as follows:
- Agency of the Year: Midwood Ambulance Service
- EMS Leadership: John Peruggia, FDNY EMS
- Youth Provider: Ernest D’Ambrose
- ALS Provider: Matthew G. Rightmyer, FDNY EMS
- RN: John Repage, RN, Staten Island University Hospital ED and EMT-B, North Shore Rescue Squad
- Communications Specialist: Martin Grillo, EMR-NYC
- Physician: Allen Cherson, DO
- Educator: William Powell, EMT-P, CIC, RF, PC

The NYC Department of Health & Mental Hygiene funded project to develop a radio network for EMS interoperability is proceeding. This network is a part of the FDNY/DOITT citywide communications system that was implemented in the summer of 2009 to meet requirements for regional interoperability. The system will enable two-way communications between mutual
aid participating EMS agencies and municipal services at the agency level. Unfortunately, there is no provision to enable ambulances from different agencies to talk to each other.

Over the course of the past few weeks, REMSCO has been working with Motorola and its contractor, Altech Electronics, on installations. 20 sites in Brooklyn, Staten Island and southern Queens have been completed. The contractor will complete Queens before moving to Bronx and Manhattan locations. REMSCO will be contacting agencies to schedule dates/times for Altech to do the installations of wiring and antennas and to answer any questions. Little else in the way of information has been provided on this project as policies, procedures and logistics still need to be worked out and will be done by the Regional EMS Council in coordination with FDNY, NYC DOITT and NYC OEM.

AMBULANCE COMMITTEE
There are subcommittees (TAGs) established on:
1. 911 Utilization of Volunteers – FDNY has not yet replied to comments on draft 911 contract for volunteers. NYC REMSCO hopes to meet with NYC Council members concerning the issue.
2. BLS First Responder Groups – NYC REMSCO recognition of new groups is still on indefinite hold while committee attempts to come up with regional guidelines. These groups do not need REMSCO or DOH authorization to operate.
3. Mutual Aid Agreements – NYC REMSCO approval of new agreements still on indefinite hold while committee attempts to come up with regional guidelines. There was a strong negative reaction to initial suggestions.
4. Security Stickers – Squads are reminded to remove sticker and return to REMSCO if vehicle is removed from service as an ambulance or ownership transferred.
5. Certificate of Need Criteria – Although NYS DOH Policy Statement 06-06 incorporates a Public Hearing in the regional process for a new or expanded ambulance or ALS first responder service recent guidance from Lee Burns advises that there is no requirement in Article 30 for a Public Hearing. A subcommittee was established at the 6/22/10 committee meeting to evaluate criteria establishing need to be used in lieu of or in addition to a hearing.

Minutes of the 4/27/10 meeting indicate FDNY EMS sent a letter opposing a proposed expansion by Corona VAC while Wyckoff Hospital is in favor of an expansion. However, nothing from Corona VAC about an expansion has been presented to the Ambulance Committee.

Regional ID card system is still being refined. Data elements embedded in the barcode include EMT/ EMT-P number, level of certification, expiration date and primary agency affiliation. Handheld scanners would be used at mobilization points and other controlled perimeters to verify identity and track personnel. Squads need to continuously submit updated information on certification level and expiration date changes as well as new member additions and deletions. Nancy Benedetto has given assurances that database updates and ID card issuances will be processed timely.

TRAINING & EDUCATION COMMITTEE
Either ambulance rotation or emergency department observation is acceptable for EMT Basic courses.

The closure of St. Vincent’s Hospital Institute of Emergency Care has created a shortage of EMT-P refresher course opportunities in the region.

QUALITY IMPROVEMENT COMMITTEE
Patient Care Restriction policy is being developed. The goal of the policy to be created is to protect the public, but also provide a mechanism for providers who are on clinical patient care restriction to be re-instated. Among the issues being discussed and considered are:
- Definitions for ‘operational’ vs. ‘clinical’ patient care restriction. Committee was unclear regarding operational restrictions.
- Clinical patient care restriction would not allow the provision of patient care.
- Restrictions should be system-wide. All agency medical directors should be informed of restrictions but a listing should not be placed on Council’s website.
- Restrictions would not be lifted should a person be terminated.
- FDNY guidelines could be used as a template for the development of regional guidelines.
- Restriction must be based upon an act of omission or commission that results in potential or actual patient harm.
- The QA Committee, not the C&C Committee will review restrictions.
- Restrictions will not have stipulations.

REMAC
- New ALS Protocol 503C involving hypothermia treatment post non-traumatic cardiac arrest will be going into effect 8/1/10 for only NYC 911 agencies (FDNY and contracted voluntary hospitals) as per NYS-DOH directive.
- Revisions to ALS Protocols 503A and 503B involving hypothermia treatment during resuscitation of non-traumatic cardiac arrest will be implemented as a pilot project by FDNY EMS and voluntary hospitals under contract in the NYC 911 System. Comments from Mike McEvoy who attended the May SEMSCO/SEMARC meetings indicate:
Additional information about the unit is online at www.engel-usa.com

ResQPOD impedance threshold devices (ITD) used during CPR were implemented on 1/3/10 but pulled from FDNY ALS Command Cars utilizing the new 4x4 pickup style chassis are experiencing unspecified electrical problems. Operations is also Dodge/Wheeled Coach ambulance contract for 56 Type I four door crew cab vehicles is progressing. NYC HHC is listed as Equipment updates:

9 minutes 22 seconds in May 2010. FDNY rarely cites these higher overall numbers.

Volume, and data on NYC.gov indicates response times on segment 1 to 8 calls were 9 minutes 53 seconds in May 2009 and 6 minutes 33 seconds for May 2010. These times only cover segment 1 to 3 calls, which are about 1/3 of total call volume.

South of Harlem”. However, there are FDNY EMS Battalion Stations at Pier 36 which is a short distance north of the South Street Seaport and in the Kips Bay neighborhood near Bellevue. The same representative is attributed saying EMS response time in Manhattan have not increased since the closing of St. Vincent’s Hospital giving 6 minutes 45 seconds for May 2009 and 6 minutes 33 seconds for May 2010. These times only cover segment 1 to 3 calls, which are about 1/3 of total call volume, and data on NYC.gov indicates response times on segment 1 to 8 calls were 9 minutes 53 seconds in May 2009 and 9 minutes 22 seconds in May 2010. FDNY rarely cites these higher overall numbers.

PROTOCOL COMMITTEE

No recommendation at this time to change current AMS protocol concerning use of glucometers although there is continuing concern that stroke patients inadvertently given glucose could be harmed.

FDNY NEWS

The NYC Office of Management and Budget has approved funding for an FDNY EMS Station on the west side of Manhattan. The Villager newspaper quoted an FDNY spokesperson saying, “the Fire Department is currently working to identify a spot in Greenwich Village or in the West 20s to open a new EMS station by the end of this year, which would be the first EMS station south of Harlem”. However, there are FDNY EMS Battalion Stations at Pier 36 which is a short distance north of the South Street Seaport and in the Kips Bay neighborhood near Bellevue. The same representative is attributed saying EMS response times in Manhattan have not increased since the closing of St. Vincent’s Hospital giving 6 minutes 45 seconds for May 2009 and 6 minutes 33 seconds for May 2010. These times only cover segment 1 to 3 calls, which are about 1/3 of total call volume, and data on NYC.gov indicates response times on segment 1 to 8 calls were 9 minutes 53 seconds in May 2009 and 9 minutes 22 seconds in May 2010. FDNY rarely cites these higher overall numbers.

Equipment updates:

Dodge/Wheeled Coach ambulance contract for 56 Type I four door crew cab vehicles is progressing. NYC HHC is listed as the contracting agency. At $8,755,400, the cost per vehicle is $156,346. There is separate contract with Wheeled Coach covering 12/1/09 through 11/30/12 for $46,678,075, which would equate to over 300 Type 1 ambulances. Command Cars utilizing the new 4x4 pickup style chassis are experiencing unspecified electrical problems. Operations is also addressing heat/cold environmental concerns of the storage of medications in the rear bed area.

ResQPOD impedance threshold devices (ITD) used during CPR were implemented on 1/3/10 but pulled from FDNY ALS ambulances on 4/23/10. Based on an analysis of cardiac arrest data, the FDNY says it determined that the device “has not performed as expected”. Information provided at the May SEMSCO/SEMAC meetings indicated sustained Return of Spontaneous Circulation (ROSC) was 18.28% in the ResQPOD group of 744 patients vs. 25.14% in a group of 541 patients without use of the device. Comparing the 2010 period to 2009 there was a net decrease in ROSC of 1.98% but this returned to 2009 levels once ResQPOD use was discontinued. In a Web presentation on 6/30/10 the company that makes the device presented data that indicated about a 27% ROSC by FDNY medics vs. about 29% by a control group mainly of voluntary hospital medics and a drop to 20% ROSC by FDNY medics in the 30 days after discontinuance. 2009 ROSC was given as about 26%. The company raised several issues with FDNY’s implementation, results and comparisons. There is evidently a more thorough analysis needed of FDNY’s use of the device. A contract worth $1,046,250.00 for the purchase of the devices through 11/30/12 was awarded to Bound Tree Medical. The single use devices retail for about $99.25 each. The American Heart Association has given the ITD a Class IIa recommendation for increasing blood flow and immediate survival rates in cardiac arrest patients. That makes it the most highly recommended CPR adjunct in the 2005 guidelines.

Refrigeration units have been purchased for maintaining normal saline at 4C (39.2F) for use in post cardiac arrest hypothermia treatment under NYC REMAC ALS Protocol 503C which is effective 7/1/10. The cooling units are 12 volt Model MD-14F manufactured by Engel. Dimensions are 17.5”x11.25”x15.6” with the base adding 3” to the height. Capacity is 15 qt., weight is 27 lbs. and max operating noise is 38 dB. 85 units were ordered at $589.00 each plus another 85 custom base plates at $394.00 each. On the newest FDNY ambulances, the portable coolers will be mounted on a slide out tray within the interior/exterior compartment.

Additional information about the unit is online at www.engel-usa.com Other ALS in NYC services will need to install their own equipment to maintain normal saline at 4C/39.2F.

Stair chair field evaluations by selected units were expected to be wrapped up the last week in May. No word when decision on a new stair chair will be made.
Pediatric immobilization devices from three manufacturers are at the Bureau of Training and will be evaluated by various field personnel. Evaluation reports will be reviewed by the Medical Equipment Committee upon completion of the review process.

King Airway manufacturer must get a 510K clearance report to the FDA to allow the device to be marketed as an emergency airway device. This will delay the Department from placing these units into service.

Combine Endotracheal Tube and Stylet – An evaluation of this combination device will be field tested through the Bureau of Training.

Cardiac monitor selection to replace the current Lifepak 12 has been made. The Bureau of Training is reviewing options to prepare a training component as well as integration into field use.

Needleless System: Braun Company presented their version of the system, which is currently used by many hospitals, and EMS Systems. A concern was the location of the ports being too close to the spin connector hub. The vendor will look at changing out the length of these extension sets.

Hypothermia Device: A reusable pressure sleeve has been selected for use with the I.V. bags. Purchasing of the devices will occur through the medical equipment unit.

Local 3621 Uniformed EMS Officers Union has amended their constitution with a provision stating any member employed by a private hospital or ambulance company that provides 911 ambulance service is prohibited from election or appointment to any position within the local.

Graduation ceremonies were held on 3/18/10 for 49 new paramedics. 48 were EMTs being promoted and the 49th was Deputy Chief Rosario Terranova being upgraded. On 5/25/10 a class of 84 EMTs graduated from the EMS Academy.

EMS dispatchers moved from 1 MetroTech Center into a new 911 dispatch center designated Public Service Answering Point #1 (PSAC 1) at 11 MetroTech Center on 6/8/10. This has been delayed for some time. According to a NY Post article, the problem involved Vesta, a $195 million call-processing system supplied by a Verizon subcontractor. Since last October, the city has generated 20 million test calls into Vesta, mostly without problem but the system crashed during a load test that sent 3,000 calls an hour into its phone lines for six days – an hourly load easily reached these days when there is a major incident. Another glitch Vesta consultants are working on is that at times the program fails to display the caller's location, a key feature that city officials demanded be part of the package. Borough fire dispatchers from Brooklyn, Manhattan and Staten Island moved to PSAP 1 some time ago. NYPD's move has been delayed by problems with Motorola equipment. Full implementation of the new 911 call and dispatch center is already 2 years behind schedule while the budget has climbed from $1.5 billion to $2 billion. A backup facility designated PSAC 2 to be built in the Bronx is in the early planning stages. An interesting 112 page Project Definition document covering the Emergency Communication Transformation Program (ECTP), as the project is called, from 2004 is online at http://www.nyc.gov/html/doitt/downloads/pdf/nyc_ectp_si_pd_final_4-7-04.pdf

FIRE OPERATIONS CODES – NEW DEFINITIONS (EFFECTIVE 4/22/10)

10-31 Assist Civilian – all calls for assistance other than medical assignments, including a unit assigned to protect EMS by diverting traffic at a highway incident, good intention calls, calls handled by other agencies, any type of investigation, searches and complaints, elevator emergencies and lockouts.

10-37 Medical Assignment Not Associated With Fire Operations

Code 1: Victim deceased
Code 2: Victim/patient is NOT breathing and requires resuscitation or may be suffering apparently life threatening injury or illness
Code 3: Victim/patient IS breathing and suffering from a non-serious, apparently not life threatening injury or illness
Code 4: Medical assignment where the unit is 10-84, has no patient contact and EMS is on-scene

NOTE: Signal 10-45 with appropriate sub-code is transmitted in lieu of Signal 10-37 for thermal burn injuries which occur as a direct result of heat from a flame.

Daniel Shacknai was sworn in as 1st Deputy Commissioner on 3/30/10. He has been with the department since 2002 having come from the Administration for Children's Services with prior Commissioner Scoppetta. Shacknai has served as Deputy Commissioner for Legal Affairs since 2007. As 1st Deputy Commissioner, he will oversee Medical Services, Strategic Planning, Intergovernmental Affairs, Family Assistance and Grants Development.

Local 3621 Lieutenants and Captains Union has raised the following issues:

The storage, dispensing of fuel and operating an air compressor require training and a certificate of fitness. The absence of personnel without the training or possession of a certificate of fitness presents a health & safety hazard. [This apparently refers to putting fuel in a vehicle and air in a tire.]

Light duty (Line of Duty Injury) Lieutenants are performing the duties of full duty members. We have been informed during a Reasonable Accommodation hearing that the desk duties of a Lieutenant are only to be performed by full duty members. Therefore, light duty members performing desk duties should stay home to recover from their injuries.
8 hour tours by NYC 911 system ambulances – includes both FDNY EMS and voluntary hospitals:

<table>
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<tr>
<th></th>
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<th>BLS Tours</th>
<th>Total Tours</th>
<th></th>
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<th>BLS Tours</th>
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Yearly average daily tour totals: 2005 = 934.2 2006 = 919.7 2007 = 923.7 2008 = 932.9 2009 = 933.8

Citywide 911 System EMS response times:

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FDNY LIASION COMMITTEE

FDNY EMS Emergency Medical Dispatch relocated to the new Public Safety Answering Center 1 (PSAC1) on 6/8/10. FDNY EMS refers to volunteer units as Community Based EMS (CBEMS) and what was the old MARS desk is now EMD Position CBEMS with a CAD Terminal ID of MA1P. The MARS number (718) 422-7393 is replaced with (347) 250-6329. There is no change to Division (Borough) RCC logon and logoff numbers.

Quarterly Liaison Committee meeting for June was cancelled as we received a notice that the representatives from FDNY EMS Operations would be unable to attend. The next meeting is scheduled for early September.

FDNY EMS' liaisons to the volunteers and voluntary hospitals are being replaced. Captain Dawn Diaz sent out notification that effective 6/20/10 she was beginning a new assignment in the new Public Safety Answering Center (PSAC) at 11 Metrotech. Lt. Stacy Scanlon was promoted to Captain on 6/1/10. Chief John McFarland is reviewing applications for positions in EMS Operations.

NYC COUNCIL PENDING BILLS

Several bills have been introduced in the NYC Council this year relating to ambulance service in the city. They have been referred to committees which may or may not decide to take action on them. Interested parties may push legislation by asking their local council representative(s) and or the committee chairs to proceed with scheduling hearings.

Intro 0115-2010 submitted 3/25/10 and referred to Committee on Fire and Criminal Justices Services - Allow NYC's community based volunteer ambulance companies to purchase gasoline or diesel fuel, for their ambulances, directly from the FDNY or NYPD.

Intro 0218-2010 submitted 5/12/10 and referred to Committee on Environmental Protection - Each ambulance acquired by the city or by any 911 participating ambulance service provider after the enactment of this law shall be equipped with verified idle reduction technology upon acquisition or within six months after acquisition. Verified idle reduction technology” shall mean technology, including but not limited to, an auxiliary power unit, that has been verified by the United States Environmental Protection Agency (EPA) and allows the engine of a vehicle to be turned off while still...
providing services to the vehicle or equipment, such as heating or cooling of the cabin and which reduces tailpipe emissions from diesel fuel-powered vehicles.

Intro 0238-2010 submitted 5/12/10 and referred to Committee on Fire and Criminal Justice Services - The Department [FDNY] shall provide vehicle insurance and access to medical supplies for any volunteer ambulance service operating within the NYC. The department shall provide ambulance driver training for any person who meets criteria established by the commissioner and wishes to become a driver for any volunteer ambulance service operating within NYC.

**TRAINING CENTER NEWS**

BED-STUY VAC received a conditional OK to resume EMT lecture classes at its headquarters. A class of 24 students began on 5/12/10. Last year the NYS DOH disapproved the location citing inadequate space because the classes were held in the squad’s new 585 square foot trailer. Practical skills classes are another matter and news reports indicate the NYS DOH would help the squad secure an offsite classroom for those portions of the class.

EMERGENCY AID TRAINING was denied authorization by NYS DOH to operate a BLS Training Center in the Bronx. EMT TRAINING, INC. has relocated to a ground floor storefront location at 89-16 175 Street, Jamaica, NY 11432. The training center was formerly on the 3rd floor of an office building at Hillside Avenue and 178 Street.

SEALEY’S TRAINING CENTER closed its doors after a NYS DOH investigation. Two courses were in progress. Clyde Sealey, founder of the training center, died in 2009.

ST. VINCENT’S INSTITUTE OF EMERGENCY CARE had an EMT-P class in progress when the hospital closed in April. The 14 remaining lectures and were moved to NY Downtown and taken over by the Borough of Manhattan Community College (BMCC). Students should be able to test out in August with skills testing at Rockland Community College, LaGuardia, Methodist and BMCC. Established in 1981, The Institute of Emergency Care was the oldest continuously operating EMS training center in the New York City region and graduated over 500 Paramedic alumni during its almost 30 years of operation.

**HOSPITAL NEWS**

AETNA INSURANCE terminated its In-Network contract with CONTINUUM HEALTH PARTNERS on 6/5/10 after talks to negotiate a new three-year reimbursement deal broke down. The move covers BETH ISRAEL MEDICAL CENTER (H03), NEW YORK EYE AND EAR INFIRMARY (H05) and ST. LUKE’S (H20), ROOSEVELT HOSPITAL (H18), all in Manhattan, and BETH ISRAEL’S KINGS HIGHWAY DIVISION (H93) and LONG ISLAND COLLEGE HOSPITAL (H49) (which is being acquired by SUNY Downstate) in Brooklyn. Aetna customers can still go to the Continium hospitals, but they will be reimbursed at the more expensive "out-of-network" rate. Most are likely to have to pay 20% to 30% of hospital services rather than get 100% reimbursement. Patients who see Continuum-affiliated doctors will be covered "in-network" for those services until at least 8/5/10 and normal emergency room benefits will still apply. There is a potential effect on ambulance services if patients insist on transport to other Aetna "in-network" hospitals. Sometimes these contract terminations are reversed quickly. A contract dispute between UnitedHealthcare, which include Oxford plans, and Continuum was settled in March.

KINGSBROOK JEWISH MEDICAL CENTER (H47) has been approved as New York State Department of Health Designated Stroke Center effective 5/16/10. Ambulance crews may transport a patient with a presumptive diagnosis of "acute stroke" from the scene to this hospital in accordance with NYC Regional Protocols.

LENOX HILL HOSPITAL (H11) has become part of the 15 hospital North Shore-Long Island Jewish Health System (NS-LIJ). The NY Times described 153 year old Lenox as the “boutique hospital of choice for the rich, the famous and New Yorkers who seek pampering during childbirth and orthopedic surgery” and quotes NS-LIJ’s chief executive as saying it is "a wonderful brand with a long history". Lenox is losing money but gives the NS-LIJ system a presence in Manhattan and access to wealthy, well-connected patients. Lenox Hill operates NYC 911 System BLS units 10C, 10F, 10O and 11B plus ALS units 10V, 10Y, 11X and 11Y but the NS-LIJ system also operates NYC 911 ambulances. How the affiliation will affect ambulance operations is unknown at this time.

MAIMONIDES MEDICAL CENTER (H53) installed a separate pediatric hotline notification phone for pediatric patients, birth through 17 years of age, at (718) 635-7076. The adult notification hotline number for aged 18 and older remains unchanged at (718) 871-6224.

NORTH GENERAL HOSPITAL (H07) announced on 6/28/10 that it was declaring bankruptcy and shutting down as a hospital. The 200 bed facility at Madison Avenue and West 120 Street will be replaced by a large government-subsidized walk-in clinic for local residents operated by the Institute for Family Health plus NYC-HHC will move two of its facilities, a nursing home and a 200-bed long-term rehabilitation center to the site from Coler-Goldwater Specialty Hospital on Roosevelt Island. The 36,000 annual Emergency Department patients will be picked up by the new clinic and nearby hospitals including Columbia Presbyterian (H17), Harlem (H07), Metropolitan (H12), Mount Sinai (H13) and St. Luke’s (H20). North General operated BLS ambulance 11E and ALS ambulance 12X in the NYC 911 System.
NORTH SHORE UNIVERSITY HOSPITAL-MANHASSET (H78) has been approved by the FDNY Office of Medical Affairs effective 4/15/10 to participate in the New York City 911 system Cardiac Arrest Center program to provide therapeutic hypothermia as a standard part of post-resuscitation management.

QUEENS HOSPITAL CENTER (H38) is expanding its medical and psychiatric emergency departments. The adult ED will expand into space currently occupied by the psychiatric ED. The psychiatric ED will be moved east within the same building and will still be accessible through the ambulance entrance. Expansion plans were part of the Berger Commission recommendations – closing some hospitals and expanding others. When built in 2002 the ED was designed for 45,000 annual patient visits but in 2008 there were over 89,000 visits and the 2009 total was about 100,000 patient visits. Four nearby 911 receiving hospital have closed. There was a 14% increase when St. Joseph’s Hospital closed and another 15% increase when Mary Immaculate, St. John’s and Parkway closed. In addition to the ED expansion, the hospital will be adding 40 in-patient beds. Site preparation work has started with the public drop off/pick up area being closed off resulting in congestion in the ambulance entrance and parking area. No completion date for the construction work has been announced.

SCHNEIDER CHILDREN’S HOSPITAL on the Long Island Jewish Medical Center (H35) campus in New Hyde Park is being renamed the STEVEN AND ALEXANDRA COHEN CHILDREN’S MEDICAL CENTER OF NEW YORK in recognition of a $50 million pledge from the Cohen’s foundation. The contribution will enable the NS-LIJ Health System to move ahead with construction of a 100,000-square-foot pavilion in front of the existing children’s hospital. The nearly $120 million project has been on hold since December 2008 because of the economic downturn. Construction is scheduled to begin in 2010 and be completed in 2013. The new pavilion will feature:
- Pediatric Emergency Center – the region’s first dedicated, stand-alone pediatric emergency department
- 24-bed Pediatric Intensive Care Unit;
- 25-bed Medical-Surgical Unit
- State-of-the-art surgery center that will include six operating rooms solely dedicated to children.

ST. VINCENT’S HOSPITAL MANHATTAN’s (H21) status as a 911 ambulance receiving facility ended at 10:00 AM on Friday 4/9/10 when it was placed on permanent diversion to all patients except psychiatric patients. Signs were taken down on 4/21/10 and the ED closed at 8:00 AM on Friday 4/30/10. FDNY EMS issued an order on 4/28 saying effective 5/1/10 St. Vincent’s is no longer a 911 receiving hospital for any patients.

Nearby hospitals seeing increased patient traffic include Bellevue (H02), Beth Israel (H03), NY Downtown (H01) and Roosevelt (H18). Interestingly, the NY Times reported NY Downtown’s Chief Medical Officer said the hospital has the capacity to take 20,000 to 25,000 more patients. NY Downtown, 2.5 miles from St. Vincent’s, is just north of the Financial District and its Emergency Department was expanded with a grant from Lehman Brothers after 9/11. The area is quiet on weekends and Downtown’s ER tends to be less busy on Saturdays and Sundays than other hospitals in the Borough. It is a level 2 Trauma Center, Stroke Center and currently receives about 40,000 patients a year.

The Associated Press news asked NYS DOH Commissioner Dr. Richard Daines in mid April whether he's concerned that lower Manhattan had lost a top-level trauma hospital, he said, "We have whole counties in the state that don't have a hospital." The nearest, most high-level trauma center, Bellevue Hospital Center, is two miles away. With the worst trauma cases dwindling to an average of one a day at St. Vincent's, the costly care [there] ``is certainly not economically viable. That's reality".

In an interesting development, Lenox Hill Hospital is receiving a $9.4 million HEAL 16 grant from the NYS DOH to fund two years of a five year contract to operate a new urgent care center that will open at St. Vincent's by the summer and will still be accessible through the ambulance entrance. Expansion plans were part of the Berger Commission recommendations – closing some hospitals and expanding others. When built in 2002 the ED was designed for 45,000 annual patient visits but in 2008 there were over 89,000 visits and the 2009 total was about 100,000 patient visits. Four nearby 911 receiving hospital have closed. There was a 14% increase when St. Joseph’s Hospital closed and another 15% increase when Mary Immaculate, St. John’s and Parkway closed. In addition to the ED expansion, the hospital will be adding 40 in-patient beds. Site preparation work has started with the public drop off/pick up area being closed off resulting in congestion in the ambulance entrance and parking area. No completion date for the construction work has been announced.

The HEAL 16 grant applications to operate urgent care centers in the St. Vincent’s catchment area.
District 18, our partner in the Association’s NYC Region, has some of the longest serving squads in the city. District 4 extends congratulations to those celebrating anniversaries:

- Bay Community Volunteer Ambulance Service - 41 years
- Bayside Volunteer Ambulance Corps - 55 years
- College Point Community Ambulance Corps - 69 years
- Corona Community Volunteer Ambulance Corps - 50 years
- Flushing Community Volunteer Ambulance Corps - 51 years
- Little Neck-Douglaston Community Ambulance Corps - 53 years
- Whitestone Community Volunteer Ambulance Service - 63 years

NYC 911 SYSTEM AMBULANCE CHANGES

Ambulance units 6C, 6K, 7A, 2V and 7W operated by St. Vincent’s (H21) were discontinued when the hospital closed. To replace them, FDNY EMS placed in service effective 4/18/10 units 6B and 7V operating out of the Battalion 8 Kips Bay Station on East 26 Street and on 4/25/10 units 6D, 7D also from Battalion 8 and unit 2W operating from Battalion 4 Lower East Side Station at Pier 36.

To alleviate concern about potentially increased response and/or travel time in the congested area, Beth Israel Medical Center (H03) will run three additional ambulance tours daily and St. Luke’s-Roosevelt Hospital (H18) will run two tours daily. On 5/16/10 St. Luke’s-Roosevelt Hospital (H18) added BLS unit 9F stationed at West 45 Street and 9th Avenue and FDNY EMS added BLS unit 7E stationed at West 34 Street and 8th Avenue plus it moved 7B to West 25 Street and 10th Avenue. This will increase from 30 to about 40 the number of 911 System BLS ambulance tours staffed each day in the area from Houston Street to 59th Street and from Fifth Avenue to the Hudson River. There are also 26 ALS tours daily in this area. Hatzalah also has a number of BLS ambulances and ALS First Response units in the area. NY Downtown Hospital (H01) had made an offer to take over three of St. Vincent’s five ambulance units.

New FDNY EMS ambulance units for Brooklyn were added to the 911 System effective 5/2/10.

- 35R and 35W at Williamsburg Station 35
- 57A and 57B at Bedford-Stuyvesant Station 57

BRAVO VAC held it second annual Keep BRAVO Running 5K run on Sunday 5/23/10. The course was a flat, fast and very scenic out and back run along the Narrows overlooking Manhattan, Staten Island and the Verrazano-Narrows Bridge. An awards ceremony followed in John Paul Jones Park with presentations to winners of various categories.

BROAD CHANNEL VOLUNTEER FIRE DEPARTMENT AND AMBULANCE CORPS conducted a non-perishable food collection drive at a number of locations in April and May. They also welcomed paper goods and household items useful to the kitchen and home. These items will be donated to needy families in the communities of Broad Channel and the Rockaways. A BCVFD/VAC official said, “Many neighbors are out of work due to the economic downturn and are struggling to hold on to their homes. We all know how the monthly food bill affects our budget; even a short reprieve from this burden can make the difference between paying our rent or mortgage and falling behind. Every little bit helps.”

CABRINI MEDICAL CENTER EMS’s expired Ambulance Operating Authority (Certificate #7289) cannot be transferred to SCLM Corp. pursuant to a 4/7/10 decision by the US Bankruptcy Court, Southern District of NY. Cabrini, as Debtor in Possession, had sought an order authorizing it to enter into an agreement with SCLM, Corp. for the sale, at $50,000, of the Ambulance Operating Authority which had expired 1/31/09. NYS DOH opposed the order because it would have entailed the reinstating the expired certificate in order to transfer it without a full review by the DOH pursuant to Article 30, Section 3008 of the NY Public Health Law. SCLM was represented in the court proceeding by Robert Jay Dinerstein and NYS corporation records indicate it has been in existence since 1/18/05 and its address is 901 Kings Highway, 2nd Floor, Brooklyn, NY 11223. The court’s decision is online at http://www.nysb.uscourts.gov/opinions/ajg/182920_338_opinion.pdf

COMMUNITY EMERGENCY RESPONSE TEAM (CERT) training for 153 new volunteers began on 3/3/10 with classes in each of the five boroughs. They will undergo a 10-week training program in disaster preparedness and basic emergency response including fire safety, search and rescue operations and disaster medical operations taught through a combination of classroom and hands-on sessions by active and retired FDNY and NYPD personnel. The CERT program now has more than 1,100 active volunteers that make up 56 teams throughout the five boroughs. The NYC Office of Emergency Management controls the CERT teams and over the last two years deployed them to assist first responders at fires, power outages, warming centers, construction accidents, and series of special events, including the Macy’s Thanksgiving Day parade. Last year CERT volunteers helped at H1N1 vaccination centers and assisted OEM and the Department of Environmental Protection locate a mysterious maple syrup odor reported in Manhattan, the Bronx and Queens by reporting the locations where the odor could be detected. Most recently, 60 CERT volunteers representing 29 different teams logged 422 hours at the Haiti Earthquake Family Resource Center in Crown Heights, Brooklyn helping visitors fill out intake forms and escorting them through the center.
EAST MIDWOOD VAC notified NYC REMSCO on 6/9/10 that it was withdrawing its application to expand its operating area. There had been opposition from some other EMS agencies as well as mixed community support.

EMERGENCY MEDICAL RESCUE of NYC is coordinating medical coverage for the Transportations Alternatives’ 21st annual NYC Century Bike tour on Sunday 9/12/10. EMS help for aid stations and vehicle escorts is needed. The Century Bike Tour starts on Central Park North taking riders for varying distances (15, 35, 55, 75 or 100 miles) through streets in Manhattan, Brooklyn, Queens and Bronx. This year there will also be a start/finish point in Prospect Park, Brooklyn. About 5,000 riders normally participate escorted by volunteer marshals. There are no street closings; cyclists ride with traffic and are expected to obey all traffic laws. Multiple first aid stations with available ambulance transport capability is needed at 5 to 6 parks throughout the city. This is an all day event starting at 6:00 AM but aid stations set up and close at varying times. EMS agencies and volunteers should contact Janet Perry at jperryemt1@gmail.com or (347) 869-0066.

FOREST HILLS VAC dedicated its new 2009 Ford/Medtec ambulance designated FH-3 and a Chevy Suburban first response vehicle designated Truck 1 with a celebration and motorcade on Sunday 5/16/10. Other activities during EMS Week included an Open House for the community and a Blood Drive. Mark your calendars - the squad’s 40th anniversary will be celebrated next year with a dinner dance on Saturday evening 11/5/11 at the Elite Palace in Woodside. The squad also announced that NYS Senator Toby Ann Stavisky secured a $100,000 legislative appropriation for another new ambulance to be delivered in the fall.

HATZALAH
FLATBUSH DIVISION received a new ambulance on 4/8/10 donated by NY Community Hospital on Kings Highway in Brooklyn. Ambulance 905 is a Ford/Braun on an E450 chassis. Features include a large front push bumper and LED lightbar. With this latest addition, the division has a total of 8 ambulances with seven based at their large facility on Ocean Avenue at Avenue N and one stationed in the original garage at Ocean Parkway and Avenue M.

NY Community Hospital is a member of the New York-Presbyterian Hospital Healthcare System.

RIVERDALE DIVISION member Jeffrey A. Moerdler was appointed in April by NY Governor David Paterson and confirmed by the NYS Senate to serve on the 12 member Board of Commissioners of the Port Authority of New York and New Jersey. Commissioners serve as public officials without pay for overlapping six-year terms. Moerdler is an EMT and works as a general commercial real estate attorney with a specialty involving communications. He has served in the past in a number of other appointed government positions.

UPPER WEST SIDE response on Friday 6/4/10 resulted in an accident involving a black SUV first response vehicle. A news report in the Gothamist under Pedestrian Struck by Volunteer Ambulance indicates the responder was proceeding north against a red light at Broadway and West 100 Street in Manhattan, swerved to avoid another vehicle and then hit two parked cars, one of which struck a deliveryman on a bicycle. A picture of the scene is at http://gothamist.com/2010/06/05/pedestrian_struck_by_volunteer_ambu.php

JAMAICA ESTATES-HOLLISWOOD-SOUTH BAYSIDE VAC held a successful blood drive on Sunday 6/27/10. NY Blood Services had a mobile unit parked on Union Turnpike in front of the squad headquarters and numerous members and community residents donated blood.

LONG ISLAND COLLEGE HOSPITAL EMS
Ambulance Operating Certificate #7142 was transferred to University Hospital of Brooklyn doing business as SUNY Downstate Medical Center at LICH. The certificate authorizes the operation of an ambulance service within the 76th and 84th NYPD Precincts in Brooklyn. The hospital operates NYC 911 System BLS ambulance units 32D, 32F, 32K and ALS units 32V and 32X.

A LICH ambulance struck a pedestrian at 7th Avenue and 9th Street in Park Slope, Brooklyn on Saturday afternoon 5/15/10 about 3:00 PM. According to online accounts the woman was in a crosswalk with a walk sign and the ambulance had its lights flashing but the siren was only heard as it turned into the intersection. The LICH ambulance was transporting a patient who was transferred to another ambulance. There are pictures at http://www.streetsblog.org/2010/05/17/eyes-on-the-street-park-slope-pedestrian-struck-by-ambulance/comment-page-1/ and interesting bystander comments at http://brooklynnian.com/forums/viewtopic.php?t=57451&start=0&postdays=0&postorder=asc&highlight=&sid=6a36e1271b013717a519b458feac7fa5

METROPOLITAN AMBULANCE & FIRST AID CORP. (now known as SEZ Metro Corp.), METRO NORTH AMBULANCE CORP. (now known as SEZ North Corp.) and BIG APPLE AMBULANCE SERVICE, INC. (formerly known as United Ambulance) have paid the United States $2.85 million to resolve false claims made to Medicare, the US Department of Justice (DOJ) announced on 6/4/10. The United States stipulated to the dismissal of the False Claims Act qui tam suit against the companies, including their president, Steve Zakheim. According to the DOJ press release, it was alleged that the companies and Zakheim used, or caused the use of, falsified records to appeal a Medicare program refund demand for medically unnecessary ambulance trips. Information on the Internet indicates the Eastern District NY US Attorney Roslynn Mauskopf...
NEW YORK RESCUE RESPONSE TEAM (NYRRT) has started a Fire Safety Program. Members will distribute and install smoke alarms, which have a battery life of 10 years, free of charge to any senior citizen that does not have one. The program covers Bensonhurst, Borough Park, Kensington and Midwood neighborhoods in Brooklyn. There are plans to expand the program to all Brooklyn South neighborhoods in the coming months. The group also teamed up with the FDNY Fire Safety Education Unit to distribute free 9 volt batteries donated by the FDNY Foundation. NYRRT has an interesting assortment of equipment resources. Its website shows two highway construction type portable generator powered flood light towers with NYRRT markings. At a recent event the group brought along a large two axle cargo trailer with official plates pulled by a member’s SUV which was outfitted with emergency lighting. There was also an ex Type III ambulance with official plates, NYC REMSCO security sticker and NYS DOH inspection sticker on the windshield and blue lights on the rear – items that may prompt official inquiries. Information about the group, which was incorporated 7/11/06, is on the web at www.nyrrt.org.

NORTH SHORE RESCUE SQUAD is to receive a $100,000 Federal Emergency Management Administration (FEMA) grant for the purchase of a new ambulance. In making the announcement on 5/18/10, US Congressman Michael McMahon said the funding from FEMA will aid the squad in "meeting its emergency response needs." The squad, founded in 1972, handles a thousand calls annually, providing medical coverage at community events and offering CPR and first aid training. Also on hand at the announcement were representatives of the Port Authority of New York and New Jersey, which has provided funding to the squad in the past.

PARK SLOPE VAC and US Senator Charles E. Schumer announced in early May that the squad has received a federal grant totaling $100,666 as part of Round 14 of the FY09 Assistance to Firefighters Grant (AFG) Program administered by the U.S. Department of Homeland Security. The funding will be used for buying new vehicle(s).

TRANSCARE has a new dark red Ford Expedition in service. It has full emergency lighting, is marked as an Emergency Response Unit and is designated OD-3. It is one of three vehicles used to either retrieve harvested organs from a hospital or bring a retrieval team to another hospital to harvest them. It has been seen at Long Island Jewish, Westchester County Medical Center and other hospitals.

WOODHAVEN-RICHMOND HILL VAC is to host the Woodhaven Senior Center. A press release indicates “Queens Borough President Helen Marshall, NYS Assemblyman Michael Miller, NYC Council members Elizabeth Crowley and Eric Ulrich, along with NYS Senator Joseph Addabbo teamed up to provide more than $40,000 in funding to aid a financially ailing volunteer ambulance corps and concurrently provide space to enable a displaced senior citizen center to return to the community of Woodhaven”. The Senior Center, originally located in St. Thomas the Apostle Church, was forced to move when the church needed its space. Dozens of seniors were subsequently transported from the Woodhaven Center on 91st Street to a temporary home at the Richmond Hill Center at 87-25 118th Street in Richmond Hill. After learning that the financially ailing ambulance corps would welcome the Woodhaven Center as a rent-paying tenant, a deal was struck by the NYC Department for the Aging, Catholic Charities, the ambulance corps and elected officials to bring the seniors back to Woodhaven and provide a revenue source for the ambulance corps. Funding was needed, however, for renovations that included providing access to the disabled. At a meeting in her office in March, Marshall announced that she would provide $25,000 for the renovations. Additional state and NYC Council funding was provided by Miller ($6,500); Addabbo ($6,000); Crowley ($5,000); and Ulrich ($5000). The Press Release is online at http://www.queensbp.org/clients/queens_press/detail_SB104_eh.asp?release_aID=681
PULSE CHECK 2010, the 55th Annual Educational Conference & Trade Show of the NYS Volunteer Ambulance & Rescue Association, will be held Thursday evening September 30, 2010 to Sunday morning October 3, 2010 at the Holiday Inn Albany on Wolf Road.

Event features seminars and trade show on Friday and Saturday, statewide Adult and Youth EMS team skills drill on Friday evening plus the annual memorial service and awards dinner on Saturday evening. There is a pre-conference full day Core Content presentation on Thursday for those involved in a CME based refresher program.

Information is posted on the Association’s web site at www.nysvara.org covering conference registration, room reservations, list of seminars, Drill application, trophy donations and Journal ads. There is also information on the web site about nominations for the Association’s annual awards and scholarships.

The hotel has an attractive room rate plan and, for those who wish, a meal plan as well. Meal packages are additional but there are numerous alternative eating establishments along Wolf Road. Conference registration for two days with Saturday evening banquet included is $120 while one day conference alone (Friday or Saturday) is $80 and banquet alone is $50. The pre-conference Core Content CME is $40. These rates are for registrations received before August 31st.

The association is pleased to announce that Mike McEvoy, PhD, RN, CCRN, REMT-P and Rich Beebe, MEd, RN, NREMT-P will again be serving as the conference Education Coordinators. NYSVA&RA President Mike Mastrianni, Jr. is serving as the Pulse Check 2010 Convention Committee Chair. If more information is needed call (877) NYSVARA or e-mail pulsecheck@NYSVARA.org.