

Part "S" and Sustainability Paper

EMS Sustainability TAG

- About 18 months of work
- Focused on recommendations in the following groups:
 - Agency
 - Education
 - Government
 - Operations
 - Hospitals
 - Staffing
 - Funding



Sustainability TAG

- 25 Key Recommendations which focused on:
 - Coordination at State, Regional, and County level
 - Increasing education
 - Increased funding
 - Eliminating Silo's
 - Performance Metrics and PSAP oversight
 - Mobile Integrated Healthcare



Section 1. Section 3002 of the public health law is amended by adding a new subdivision 1-a to read as follows:

<u>1-a. The state emergency medical services council shall advise and assist the commissioner</u> on such issues as the commissioner may require related to the provision of emergency medical service, specialty care, designated facility care, and disaster medical care. This shall include, but shall not be limited to, the recommendation, periodic revision, and application of rules and regulations, appropriateness review standards, treatment protocols, workforce development, and quality improvement standards. The state emergency medical services council shall meet at least three times per year or more frequently at the request of the chairperson or department and approved by the commissioner.

• § 2. Section 3003 of the public health law is amended by adding a new subdivision 1-a to read as follows:

• <u>1-a. Each regional emergency medical services council shall advise the state</u> <u>emergency medical services council and department on such issues as the state</u> <u>emergency medical services council or department may require, related to the</u> <u>provision of emergency medical service, specialty care, designated facility care,</u> <u>and disaster medical care, and shall carry out duties to assist in the regional</u> <u>coordination of such, as outlined by the state emergency medical services</u> <u>council with approval of the department.</u>

• § 3. The public health law is amended by adding a new section 3004 to read as follows:

 § 3004. Emergency medical services system and agency performance standards. 1. The state emergency medical services council and with input from the regional emergency medical services councils, in collaboration and with final approval of the department, shall create an emergency medical services system and agency performance standards (hereinafter referred to as "performance standards") for the purpose of sustaining and evolving a reliable emergency medical services system including but not limited to emergency medical services agencies and any facility or agency that dispatches or accepts emergency medical services resources.

• 2. The performance standards may include but shall not be limited to: safety initiatives, emergency vehicle operations, operational competencies, planning, training, onboarding, workforce development and engagement, survey responses, leadership and other standards and metrics as determined by the state emergency medical services council, with approval of the department, to promote positive patient outcomes, safety, provider retention and emergency medical services system sustainability throughout the state.

3. The performance standards shall require each emergency medical services agency, dispatch agency or facility that accepts emergency medical services resources to perform regular and periodic review of the performance standards and its metrics, perform surveys, identification of agency deficiencies and strengths, development of programs to improve agency metrics, strengthen system sustainability and operations, and improve the delivery of patient care.

•<u>4. The department, after consultation with the state emergency</u> medical services council and with input from regional emergency medical services councils, may contract for services with subject matter experts to assist in the oversight of the performance standards statewide.

• <u>5. Emergency medical services agencies that do not meet the performance</u> <u>standards set forth in this section may be subject to enforcement actions,</u> <u>including but not limited to revocation, suspension, performance improvement</u> <u>plans, or restriction from specific types of response including but not limited to</u> <u>suspension of ability to respond to requests for emergency medical assistance or</u> <u>to perform emergency medical services.</u>

• § 4. The public health law is amended by adding a new section 3020 to read as follows:

• <u>§ 3020. Recruitment and retention. 1. The commissioner shall establish and</u> <u>fund within amounts appropriated, a public service campaign to recruit</u> <u>additional personnel into the emergency medical system fields.</u>

• <u>2. The commissioner shall establish and fund within amounts appropriated</u> <u>an emergency medical system mental health and wellness program that</u> <u>provides resources to emergency medical service practitioners to retain</u> <u>personnel in the emergency medical system fields.</u>

• § 5. Section 3032 of the public health law is renumbered section 3034 and two new sections 3032 and 3033 are added to read as follows:

• § 3032. State emergency medical services task force. 1. The department shall develop a state emergency medical services (EMS) task force, operated by the department, that may coordinate and operate resources that are needed around the state in situations including but not limited to a disaster, specialized response, or community need.

• <u>2. The state EMS task force shall be made up of non-government and government agencies,</u> <u>that are licensed to provide emergency medical services in the state including but not limited to</u> <u>commercial agencies, nonprofits, fire departments and third services.</u>

• <u>3. The department shall allocate funds to effectuate the delivery of the state EMS task force</u> <u>that shall allow for contracting with licensed emergency medical services agencies, the purchase</u> <u>of specialized response equipment, staff to carry out the daily functions of the state EMS task</u> <u>force either directly or by contract and other functions as determined by the department.</u>

• <u>4. The state emergency medical services council shall make recommendations to the</u> <u>department to effectuate the development and delivery of care by the state EMS task force.</u>

- <u>5. The state EMS task force shall have the authority to operate throughout</u> <u>New York state.</u>
- § 3033. Rules and regulations. The commissioner, upon approval of the state emergency medical services council, may promulgate rules and regulations to effectuate the purposes of this article, provided, however, that sections three thousand thirty and three thousand thirty-one of this article shall be subject to the provisions of section three thousand thirty-four of this article.

- § 6. Subdivision 2 of section 163 of the civil service law, as amended by section 4 of part T of chapter 56 of the laws of 2010, is amended to read as follows:
- <u>Notwithstanding any law or regulation to the contrary, active members of volunteer</u> <u>ambulance companies serving one or more municipal corporations pursuant to subdivision</u> <u>seven of section ninety-two-a of the general municipal law shall be eligible for health benefits</u>

regardless of the amount of funds derived from public sources.