

Onondaga County Legislature

JAMES J. ROWLEY Chairman

TAMMY BARBER Deputy Clerk

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PUBLIC SAFETY COMMITTEE MINUTES – JUNE 20, 2023 MARK A. OLSON, CHAIR

MEMBERS PRESENT: Mr. McCarron, Mr. Ryan, Mr. Bush, Mr. Kinne

ALSO ATTENDING: see attached list

Chair Olson called the meeting to order at 9:01 a.m. The minutes of the previous meeting had been distributed, and there were no objections to waiving the reading. There were no corrections to the minutes, and the minutes were approved.

- 1. <u>EMERGENCY COMMUNICATIONS (E-911)</u>: Julie Corn, Commissioner; Kevin Spraker, Deputy Commissioner of Technology
 - a. Amending the 2023 Onondaga County Budget to Accept Grant Funds from the New York Statewide Interoperable Communications Grant Targeted Program (\$2,750,000)
- Looking to expand operating budget by \$2.75M to accept a grant from NYS
- Applied for grant with neighboring counties
- Receive SICG (Statewide Interoperable Communications Grant) every year
 - This request is a SICG Targeted grant specifically to upgrade radio system
- Radio system is very sophisticated and keeps expanding across multiple counties
 - O St. Lawrence County to Broome County
- Trying build a redundant core Master site
 - o Current Master site is in Onondaga County; looking to put a second one in neighboring county
 - Would provide functionality needed in case current Master site goes down
 - o 911 can never go down; this would give redundancy for radio system
 - Would receive new shelter, generator, microwave connectivity and redundant core

Questions/Comments from the Committee:

- What radios is E-911 talking about?
 - o Police, fire, EMS, and other supported agencies
- Some DOT's have radios that are connected
 - Correct, this is not changing current radios
 - When radio is keyed up, it automatically goes to the Master core
 - If Master core is down, it would go into a 16 channel talk group and lose all resource channels
 - o This upgrade would be taking the brains of the system and adding a second one
 - If Onondaga County went down, the second one would pick up and radios would function
- Where are you thinking about putting it?
 - Oswego County; but ink is still a little wet
- This is just a Master site, no new radios?
 - o No; it would be one additional sink tower
- One tower?
 - o Yes

- Talking into the radio is the brain that operates the system; it is not the handheld portable or mobile in the car
- Master site is the brains behind the scene, this would be adding a backup site in case Onondaga County goes down
- Are there matching funds for this?
 - o No
- Is it good enough to cover?
 - O Yes, it will cover the whole thing

A motion was made by Mr. Kinne to approve this item.

Questions/Comments from the Committee Continued:

- Is this the brains behind the inner operability that the county did for the last four years?
- Was it a capital improvement that were all put in at United Radio?
 - o Yes
- What is the next step?
- Will there be 5G wavelength?
- How will Madison County and all other small counties get on board with what Onondaga County is doing?
- Is redundancy further down the road?
 - o The radio system runs off a UHF system; currently have 16 tower sites around Onondaga County
 - Other counties have joined to help with maintenance costs
 - Never had the ability to add a secondary core
 - o Every 2 years there is an upgrade to switches and software to the radio system
 - o With the new upgrade, a second core to the radio system can be added
 - o 5G would be like the modems that were put into cars 4 years ago
- It changes fast; what was talked about 3 years ago is now obsolete
 - o That is about how often upgrades are asked for to stay current

Mr. McCarron seconded the motion.

Ouestions/Comments from the Committee Continued:

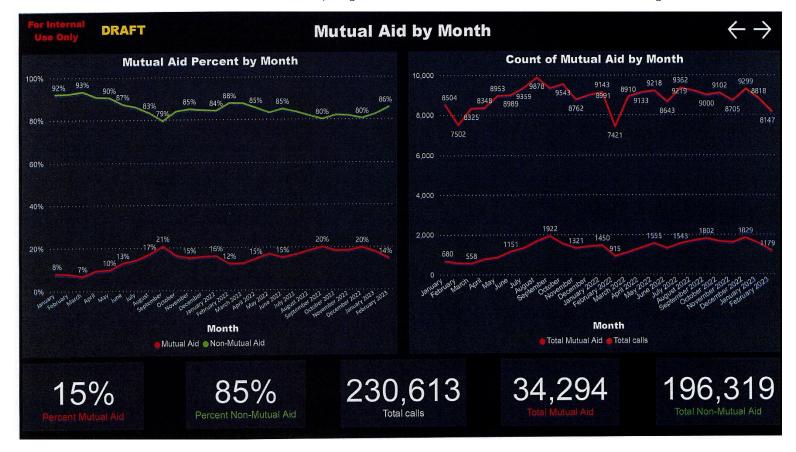
- Do we have an operating agreement that needs to be updated?
 - That is not necessary; the consortium agreement is the county's agreement and will leverage purchasing department to get what is needed

Request: E-911 to let Legislature know when 2nd Master site is complete

Request: E-911 to let Legislature know when there is an updated consortium agreement

Vote was taken, passed unanimously; MOTION CARRIED.

- 2. EMERGENCY MANAGEMENT: Daniel Wears, Commissioner; Jeffrey VanBeveren, Director
 - a. INFORMATIONAL: EMS Data Update
- The handout in black background is primary
- The typed handout is an addendum for months not into the interactive dashboard yet
- Overall have seen some improvements in the system as a whole
- Will continue to face challenges and will work with EMS agencies throughout the county to address challenges
- Focused on 2 data sets over the past 2 years:
 - o Mutual Aid Calls
 - Agencies supporting each other by responding to calls outside their primary operating authority
 - Hospital Wait Times



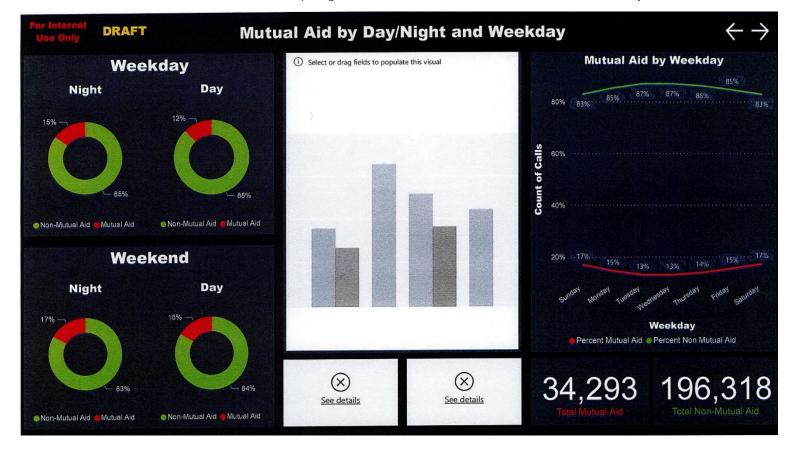
Mutual Aid:

March Mutual Aid	Count	Percent
Mutual Aid	962	10.8%
Non-Mutual Aid	7956	89.2%
Total	8918	

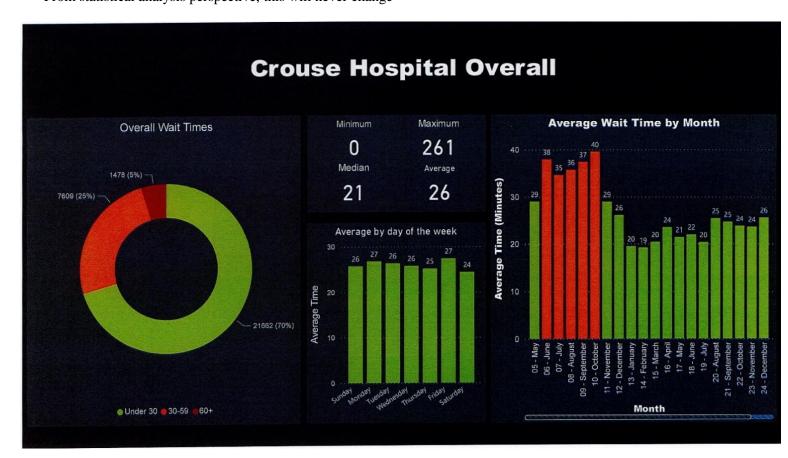
April Mutual Aid	Count	Percent		
Mutual Aid		956	11.0%	
Non-Mutual Aid		7699	89.0%	
Total		8655		

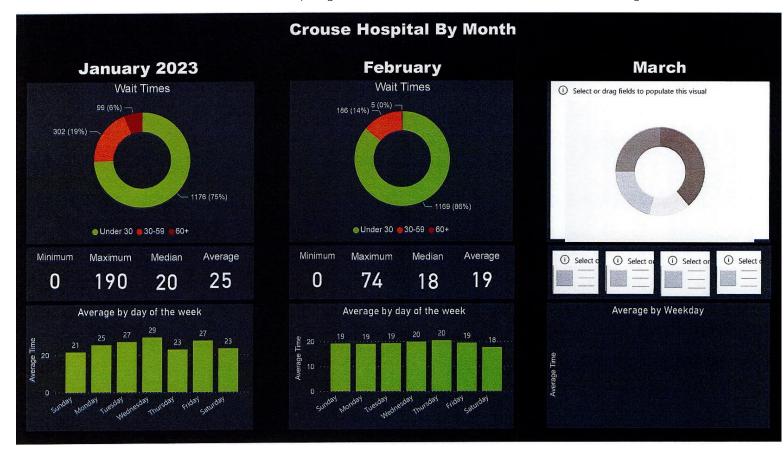
May Mutual Aid	Count	Pe	ercent
Mutual Aid		979	10.8%
Non-Mutual Aid	8	3072	89.2%
Total	(9051	

- Slide looks at mutual aid by month through February 2023 (March, April, May are listed separately)
 - o Left side as a percent
 - o Right side as a count
- Peaked in September 2021, hit number again in ~September 2022
- Have seen improvement
 - o Through February 2023 down to 14% of calls recovered by mutual aid
 - March 2023 at 10%, April 11%, May 10.8%
- Summer months often climb a little bit



- Overall snapshot weekends have the most utilization of mutual aid over the past 220k calls
- This is a very large data set
- From statistical analysis perspective, this will never change





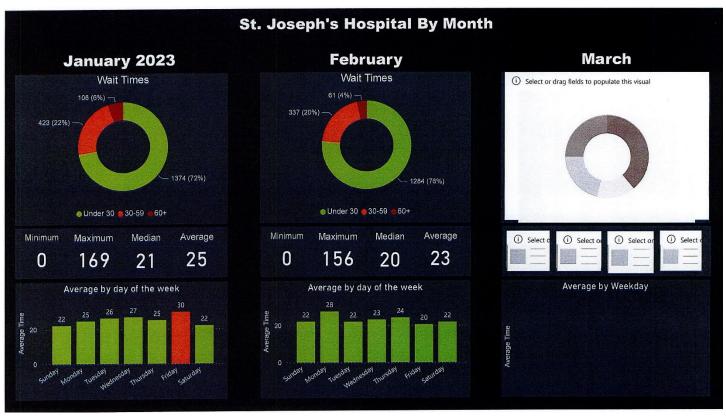
March	Average	Under 30	Over 30	Over 60	Total	Percent over 30	Percent over 60
Community	19.497241	695	111	6	823	13.5%	0.7%
Joes	22.106377	1597	393	43	2005	19.6%	2.1%
Upstate	23.101201	1580	526	66	2143	24.5%	3.1%
Crouse	18.867255	1419	196	8	1629	12.0%	0.5%

April	Average	Under 30	Over 30	Over 60	Total	Percent over 30	Percent over 60
Community	20.30926	629	140	6	782	17.9%	0.8%
Joes	19.70636	1561	253	14	1832	13.8%	0.8%
Upstate	25.6038	1390	482	59	1909	25.2%	3.1%
Crouse	17.56035	1258	131	10	1402	9.3%	0.7%

		Under				Percent	Percent
May	Average	30	Over 30	Over 60	Total	over 30	over 60
Community	20.03595	720	146	8	884	16.5%	0.9%
Joes	20.62462	1560	247	12	1823	13.5%	0.7%
Upstate	22.91421	1595	519	47	2147	24.2%	2.2%
Crouse	17.37702	1350	134	8	1489	9.0%	0.5%

- Looked at the impact of hospital wait times and effect on EMS system
- Summer 2021 was the peak with highest average wait time
 - Pandemic had exacerbating impacts on mutual aid and hospital wait times
- Crouse average continued to improve through May 2023



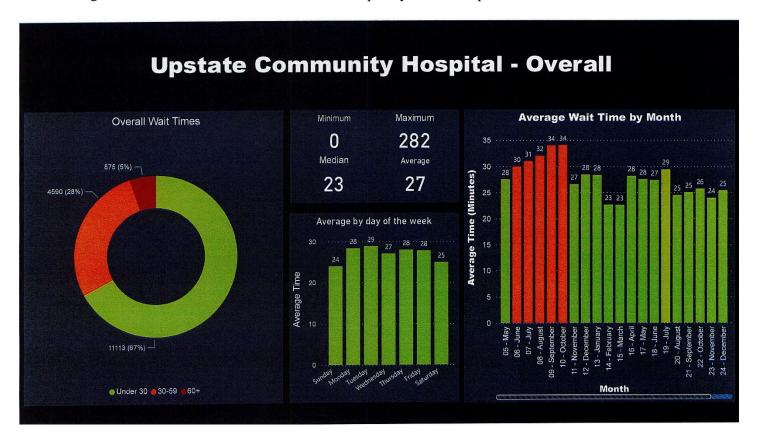


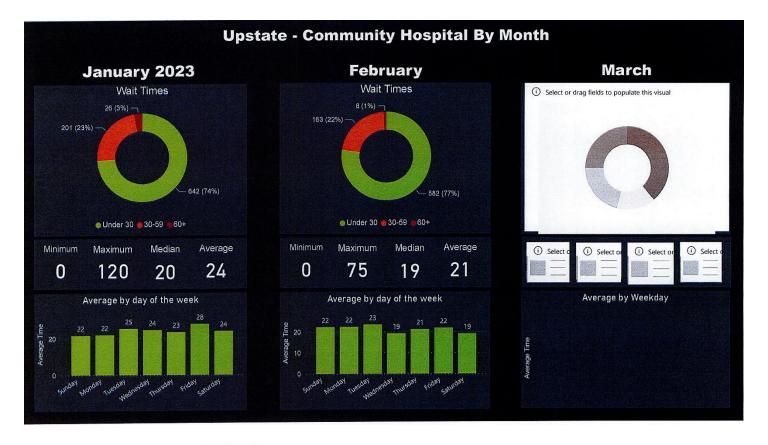
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- St Joseph's continues to improve
- Still have outlier calls with extended wait times that keep ambulance crew at hospital for unusual periods of time
 - O Longer wait times means not back on the street as quickly and will require mutual aid to cover calls





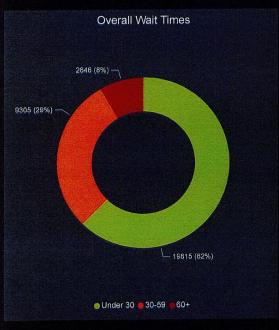
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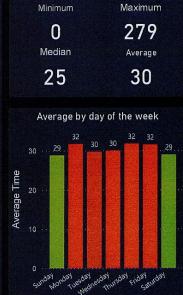
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- Upstate Community continues to improve; September 2021 was worst
- Current average is 20 minutes for month of May

Upstate Downtown Hospital - Overall

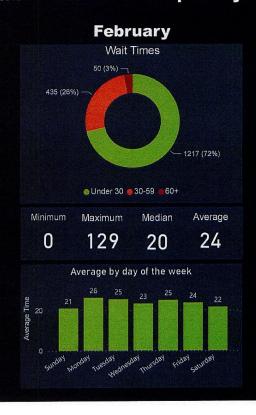


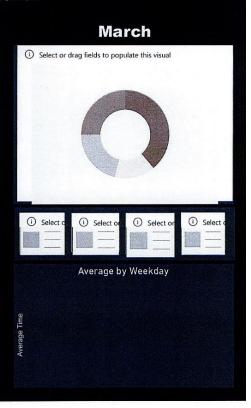




Upstate - Downtown Hospital By Month

January 2023 Wait Times 134 (7%) 1252 (67%) Under 30 30-59 60+ Minimum Maximum Median Average 0 204 22 28 Average by day of the week 40 35 Average by day of the week 135 29 26 25 27 29 29 26 25 28 29 26 25





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Upstate Downtown is a trauma center; expect higher wait times

Questions from the Committee:

- Did construction of ER have anything to do with wait times?
 - o Had impact on safety getting patients across the street
 - O Did not have actual impact on offload times
 - o Everything going on with Emergency Department (ED) was in the parking lot; not inside
- Are we measuring arrival time to clearing the hospital time?
 - o Yes
- Does it include paperwork?
 - Yes, electronic medical records (EMR) need to be uploaded to ED within 2 hours, as opposed to leaving a copy with the patient

EMS:

- Full 60 page presentation states there are many variables that come into play
 - These are pieces of data to inform decisions, not make decisions

Ouestions/Comments from the Committee:

- Is there overlay relative to which agencies require more mutual aid than others?
 - Yes, that is in the full report
 - o It is not an overlay, data sets will need to be compared month to month
 - o Bi-Agency specifics are the cyclical nature of who is paying the most today and who will pay the most tomorrow
 - o The report is a "Count by Agency", not by month
 - Tracks mutual aid received and mutual aid provided
 - Overall there are 250k data points

Request: EMS to supply full 60 page report to the Legislature

- It is interesting to see which organizations have the hardest time covering staff
 - o The hard work is breaking it down by month to understand the current status
 - One month an agency will be having a hard time, then staffing improves
 - o The next month a different agency that has been doing well will be having a hard time
 - o Improvement due to reaction between agencies; i.e.: One agency increases salaries, the others react and also increase salaries

- Have you seen reduction in Nurse Navigation?
 - o Four things having an effect on data sets
 - Nurse Navigation
 - For the first year (5/2022 to 5/2023), 1,773 calls answered; taking 755 out of EMS system
 - o Expected to grow; not in the ER (Emergency Room)
 - 755 people never got transported to hospital or other destination; ~ 2 calls per day
 - o Calls could have been home care, referred to another place or Uber to Urgent Care

Questions from the Committee:

- Who tracks that?
 - o 911 and GMR (Global Medical Response); GMR owns Nurse Navigation
 - o 911 is the contractual manager with GMR
- Is Nurse Navigation able to make suggestions to patients?
 - Yes; after a certain criteria, calls are transferred to a nurse with GMR
 - O Nurse does an in depth triage and makes recommendation to patient
 - Patient makes final decision; can be transferred to hospital or accept nurse recommendation

EMS:

- Gone to a tiered BLS (Basic Life Support), ALS (Advanced Life Support) response dispatch system
 - o There are now 6 call types that can be dispatched as a BLS ambulance which will save ALS ambulances for more critical calls

Questions/Comments from the Committee:

- How are the call types identified?
 - o Call takers go through a nationally recognized questionnaire with caller
 - o Call taker identifies what type of call and priority level
- A fractured arm does not need two paramedics
 - o Correct, the Medical Director and 911 sign off on call type changes and how they are dispatched

EMS:

- City fire put an ambulance at Station 3, Bellevue, ~ 1500 calls year-to-date 2023
 - o 150 to 200 calls supporting neighboring jurisdictions within the county
- Need to continue addressing the problem across entire spectrum of call; when someone calls 911 versus arriving or transferring to hospital care
 - o This is the only way to make substantive change with the current environment due to state law and other things that limit what the county and other providers can do
 - Have to stay within confines

Question from the committee:

- Has city made a decision on RFP?
 - No idea; only know of 1 response

EMS:

- Agency staffing has improved and leveled off
- Job going forward is to continue working with agencies to figure out ways to help over the entire spectrum
 - o Helping identify issues before they become problems and how to be supportive to alleviate issues
 - Weekly calls with ambulance Directors are identified opportunities for improvement
 - Weekly staffing and special events are reported in respective operating authority
 - Good opportunity for information sharing and assist each other with staffing if needed
 - Improvement over the last year
 - Workforce and hospitals have leveled off

Steering away from post-pandemic and returning to normalcy

Questions/Comments from the Committee:

- Would be helpful if information is received prior to committee meeting
 - o There is a delay in getting data; i.e. June data will not be received until August
- Would like to share with agencies within Legislative District to get feedback
 - All data is done in collaboration with EMS agencies
 - o Agencies call out errors; some are not errors, just the way data is coming out
- Does Syracuse Community Health Center play a role?
 - o Can be alternative destination in a rideshare like a WellNow or other Urgent Care
- What about the AMR TC3?
 - o TC3 is a program that centers around Centers for Medicare
 - o AMR in a 5 year pilot project; determination is made to treat at home and release or take to alternative destination
 - o NYS law states the only place an ambulance can transport is to ED
 - With TC3 program, patients can be taken to alternative destination or treat and release at home and still collect for Medicare
 - AMR project is piloting across the nation because they are a nationwide company
- Is there any data on that?
 - AMR would have data; EMS does not

A motion was made by Mr. McCarron, seconded by Mr. Kinne, to adjourn the meeting. Passed unanimously; MOTION CARRIED.

The meeting was adjourned at 9:30 a.m.

Respectfully submitted,

TAMMY BARBER, Deputy Clerk Onondaga County Legislature

ATTENDANCE

COMMITTEE: PUBLIC SAFETY COMMITTEE

DATE: JUNE 20, 2023

NAME (Please Print)	DEPARTMENT/AGENCY
John DRAPIKOWSK	0030
Julie Corn	EGII
Kenn Spraker	E 911
Dan Wear	en
JEFF VANBEVEREN	EM
TYPE PEET	En
Darcii Lesniak	les
Tim Frakechi	Counsel
Shorist Shelley	Sheriff
Jom Newton	Sheriff
Jim Bube	Lea
John De Santis	Lea