



Report of the East Hampton Ambulance Task Force

Approved
March 13, 2025

Report of the
EAST HAMPTON AMBULANCE TASK FORCE

to the
Town of East Hampton Town Council
March, 2025

PREFACE

On May 28, 2024, the East Hampton Town Council approved a resolution to establish the East Hampton Ambulance Task Force, created and empowered “to examine, investigate and advise the Town and Town Council regarding the future provision of ambulance service.” The call for the Task Force came from the recognition “that the changing nature of ambulance service and rising costs associated with that service have made it necessary to consider options for the future and to provide a planful way in which the future of ambulance service in the community will be addressed....”

OBJECTIVES OF THE TASK FORCE

The enabling resolution, which is included with this report, outlined both suggested and required objectives of the Task Force, which are summarized as follows:

- Evaluate the current ambulance services provided by the East Hampton Ambulance Association
- Review existing models in Connecticut for the provision of ambulance services
- Consider the efficacy of available models for East Hampton and make recommendations
- Prepare proposed budget(s) for the recommended system
- Prepare a written report on or before December 31, 2024

By consensus, the overriding objective of the Task Force members in assessing future ambulance services for East Hampton prioritized service first, followed equally by reasonable financial impact and community satisfaction.

OUR WORK

The Task Force embraced its charge seriously intent on understanding the challenges facing ambulance services not just locally, but throughout Connecticut. With the invaluable assistance of our Town Manager, the Task Force met face-to-face with representatives from both independent EMS providers and surrounding towns with in-house EMS departments, as well as our current provider, the East Hampton Ambulance Association.

To better understand the scope of the Task Force’s work, it is important to review the chronology of its meetings and the general focus of each, as follows:

- June 17, 2024 Inaugural meeting. Presentation by the East Hampton Ambulance Association discussing recent history and current operations. Discussion by Task Force and strategizing its path forward.
- July 1, 2024 Task Force discussion and creation of S.W.O.T. (Strengths, Weaknesses, Opportunities, Threats) analysis of EMS in East Hampton in order to define appropriate next steps. The results of the S.W.O.T. analysis are included with this report.
- July 17, 2024 Discussion with Laura Francis, former first selectman of Durham, to review Durham's decision to contract with Middlesex Hospital, an independent provider of EMS services, to serve the town.
- July 24, 2024 Discussion with Tom Michalewski, EMS coordinator for Portland, to review Portland's relationship with Hartford Healthcare's for-profit independent provider of EMS, formerly Hunter's Ambulance.
- September 12, 2024 Discussion with Bud Meyers, Fire Chief of Coventry, to discuss the incorporation of EMS services as a town department, which were previously provided by Coventry's non-profit ambulance association.
- November 7, 2024 Discussion with Charles Johndro and Todd Jones representing Hartford Hospital's for-profit EMS service provider, Hunter's Ambulance.
- November 14, 2024 Discussion with Jim Santacroce from Middlesex Hospital Ambulance Service to discuss the Hospital's EMS services to Durham.
- November 25, 2025 Task Force discussion and synthesis of information obtained from all meetings since June 17, 2024. Decision to meet with East Hampton Ambulance Association to evaluate its operations within the framework of information gathered.
- December 19, 2024 Discussion with Directors and staff of the EHAA, focusing on current operations and challenges, range of services currently provided to the East Hampton community and six month, year-to-date financial results.
- January 6, 2025 Task Force focus on the financial viability of the EHAA going forward, projecting when the Association would run out of funds if left without

outside funding, and what a reasonable transition to town funding would be required to continue as a going concern.

- February 3, 2025 Task Force discussion and determination of final recommendations and drafting of report to the town council.
- March 3, 2025 (TBD) Task force discussion of draft final report.

Detailed minutes of each meeting outlined above were taken by town staff, and are attached to this report. Therefore, the detailed discussions of each meeting are not re-hashed above. The following findings result from piecing together bits and pieces of insight gained from each of the above encounters as our analyses progressed over the approximate nine months of our work.

FINDINGS

The findings of the Task Force are as follows:

1. Municipal ambulance associations and town emergency departments both statewide and nationwide are experiencing an increasing disparity between expenses and revenue. Historical revenue sources of fees from insurance providers, Medicare and Medicaid have not kept pace with the increasing cost of services, due primarily to the need to pay personnel due to the decline in volunteerism which has been the hallmark of local EMS services. Volunteer personnel has declined locally to approximately 10% of required staff, when a decade or so ago volunteers constituted a majority of service personnel. This is in line with other agencies which we have interviewed.
2. This trend is not unique to non-profit ambulance associations. Our discussions with towns which have brought EMS services “in-house” face these same challenges; not just finding qualified, unpaid volunteers, but even finding paid EMS personnel who are willing to serve.
3. We interviewed two “independent” EMS providers (neither local not-for profit nor town department emergency service provider) which effectively dominate this service in our region. We met with the representatives of Middlesex Hospital Ambulance Services and Hartford Healthcare Hunters Ambulance Service to gauge their interest in contracting with East Hampton for EMS services. Middlesex Hospital Ambulance Service operates under the umbrella of the hospital, which is a non-profit entity, as is their ambulance service. While MHAS does service Durham EMS contractually, it did so only as an “emergency” response to the rapid deterioration of that town’s own EMS volunteer association. It is not interested in expanding its services to other towns. Hunters, on the other hand, is a for-profit arm of Hartford Hospital and services roughly a half dozen municipalities contractually. The representatives were knowledgeable and clearly expert in their field, offering insights into some improved EMS services which might be

considered peripheral to basic and critical EMS services, but interesting and a future focus of the “industry.” However, the Task Force generally felt that they were especially guarded with respect to any suggestion of cost to the town, regardless of configuration of services (for example, would they maintain a 24/7/365 presence in East Hampton, or send in ambulances when necessary?). While somewhat understandable, they recommended that they be provided with a detailed RFP and a relatively long runway to respond. These things amplified the growing reluctance of Task Force to recommend a future of contracting for EMS with an outside vendor, thereby relinquishing a modicum of control over services and cost.

4. As stated previously, the overriding objective of the Task Force in assessing future ambulance services for East Hampton prioritized service first. In our meetings with the East Hampton Ambulance Association, we focused heavily on understanding the current level of services that the Association provides our community. In rather detailed power point presentations, the Association outlined a range of services it currently provides, the most important being target industry-standard response times under 10 minutes per call. Further, the Association coordinates well-functioning mutual aid interactions with surrounding towns, provides standby coverage of approximately 20 types of community events, and provides CPR training for our community in general, in addition to specific training to childcare providers, our schools and other community groups such as scouts and service organizations. The Task Force was favorably impressed with both the amount and scope of the services provided.
5. As to cost, the Task Force sought to understand how towns were managing the increasing shortfall of EMS fee revenues against expenses. Just what are towns paying? The most helpful information came from our discussions with or about the Towns of Durham (certainly a smaller community than East Hampton) and Coventry, a town demographically most like East Hampton. Relative to Durham, minutes of that meeting reflect that the interviewee (the former First Selectman) suggested that running a fully functioning town EMS department 24/7/365 would cost the town upward of \$1,000,000. The Middlesex Hospital Ambulance Service representative confirmed our suspicion that that amount seemed over inflated; however, the representative did remark that those operations were costing approximately \$400,000 above and beyond fee revenue. That is with Durham providing the ambulance station and ambulances for operations. Relative to Coventry, the operating cost incurred above fee revenue approximated \$400,000 when EMS became a town department in 2017, and has escalated to about \$800,000 currently. Given these benchmarks, it is not unreasonable that annual net operating costs (expenses in excess of fees) would approach \$500,000 for East Hampton.
6. Current financial data for the East Hampton Ambulance Association for the six months ended October 31, 2024 reflect a monthly deficit of cash expenses over revenue to approximate \$20,000 - \$22,000. **This includes no provision for ambulance replacement via sinking fund, lease or purchase.** Even if we were to assume an aggressive loan

repayment, lease arrangement or sinking fund requirement of \$100,000 annually for a replacement ambulance, the annual cost for current ambulance service would not appear to exceed \$400,000, which seems to be a recurring **historical** number for the towns mentioned above.

7. Given the Task Force's work regarding the cost of providing EMS services going forward for any municipality, **it has become evident that municipal budgets must augment emergency services for its community, regardless of the mode of service the municipality chooses.**
8. It was found that, currently, the East Hampton Ambulance Association has substantial financial resources which currently fund its monthly cash deficits mentioned above. However, projections developed and reviewed by this Task Force reflect that, in the best case scenario, reliance on these funds alone will deplete those resources early in 2027, effectively shutting down EMS operations. These projections also present a model whereby those existing funds could create an attractive "on ramp" for eventual town funding of EMS services regardless of the mode of service the municipality chooses.
9. The Task Force did not authorize a special survey or other outreach mechanism to assess community thoughts about EMS services in general or EHAA services in particular. As mentioned previously, the Task Force considers community satisfaction with ambulance services the third leg of assessing the "right" choice of EMS services for our community. However, Task Force members do not live under a rock; they are involved citizens who are well connected with their neighbors and fellow citizens. Throughout the Task Force's existence, at virtually every meeting, members strove to evaluate each method of EMS service in terms of their understanding of community appreciation of current EHAA service, and found no evidence to suggest that alternate methods would be equal to or better than that East Hampton enjoys with EHAA.

CONCLUSION

After serious and informed consideration, it is the recommendation of the Task Force that:

For the foreseeable future (approximately three to five years through budget year ended June 30, 2030), the Town of East Hampton will be best served by its current EMS provider, the East Hampton Ambulance Association. This recommendation is based on the Association having successfully met the Task Force's three prong assessment criteria: proven EMS service, reasonable cost compared to other modes of EMS delivery, and community satisfaction.

The Town Council is advised to adopt and recommend to the Board of Finance a budget plan for the upcoming budget cycle and beyond that on ramps funding for continued EHAA operations. The projections referenced above provide a possible road map for this transition.

THE PATH FORWARD, NEAR TERM

Without question, effective emergency medical services are critical in any town, not the least of which is East Hampton. Not only is this service required to be provided under state law, but the promise of public safety that ensures the protection of life and property of our residents is a bedrock of town government responsibility.

As such, it is incumbent on a municipality to ensure that all providers of public safety services operate with the highest degree of management care, concern and oversight, fiscal responsibility and attention to concerns of personnel throughout the organization, without whom the organization can not operate.

Clearly, from our discussion above, the EHAA provides admirable EMS services to our town in many different ways, hence our recommendation to continue with a service that has performed dutifully and is well respected within our community.

However, the Board of Directors, Task Force and town officials all recognize that the challenges created by the continued failure of the fee-for-service model to pay the bills has demanded greater internal oversight by the Board, more rigorous financial analysis and improved communication with town officials.

It is the town's responsibility to acknowledge that the East Hampton Ambulance Association is an organization separate and distinct from town government, and deserving of respect for its independent governance and mission to serve East Hampton laid out in its founding documents. It is the Association's responsibility, in part due to its mission statement but more so due to its impending reliance on town funding to operate, to embrace new modes of communication and financial advisory roles.

To that end, the Task Force recommends that the EHAA take the following actions:

- Fill the open vacancy on the Board as soon as possible; consider an applicant with business and/or management experience. Appoint and engage one or both town liaisons to the Board as outlined in the EHAA bylaws. Invite other guests to board meetings if deemed helpful.
- Establish an active standing finance committee, utilizing both board and non-board members, that will analyze financial operating results and present the underlying financial statements at the monthly Board of Director meetings.
- Continue to prepare a comprehensive annual budget which should be provided to the Town Council prior to February 28 of each year.
- Provide quarterly financial statements to the Town Council with comparisons to budget, to include explanations of 10% variances from budget.
- Recognize the imperative of investigating new revenue streams, to include reasonable reimbursement for ambulance loan, reasonable fees for services to municipalities outside of mutual aid responsibilities, and fundraising.
- Focus on cost containment without jeopardizing the ability to provide services. Evaluate cost efficient scheduling of personnel, the largest expense.

- Re-evaluate channels of communication between line EMTs and techs, management and the Board to ensure concerns of front line personnel are heard and, conversely, Board guidance is disseminated.
- Continue, and formalize if necessary, regular communication between the EHAA Chief of Service and comparable officials in town public safety departments.
- Prepare an annual “State of the Association” report to the Town Council evaluating the successes and challenges of the previous year and those anticipated in the next, and discussing the ongoing vitality of the Association.

The Town and EHAA should consider these recommendations and conform them, where mutually acceptable, to an amendment to the current contract for services between the two entities.

THE PATH FORWARD, LONG TERM CONSIDERATIONS

The provision of EMS services in municipalities continues to be in a state of flux with shifting modes of providing those services. Financial and regulatory issues impacting these services continue to change. Perhaps nothing is constant in this area of public service but change.

Because the future of EMS services is murky past the foreseeable future, it becomes the role of town government to assess options for these services in order to be prepared to seamlessly transition to a new mode of service, if necessary.

There is little concrete evidence at this time to suggest that the East Hampton Ambulance Association, with proper funding, constant improvement and adoption of the above recommendations, could not continue to serve East Hampton well into the future. The EHAA does many things well, and it is difficult to imagine that any alternative solution would perform substantially better at a comparable cost.

However, it is not outside the range of possibilities that there could come a time when the Association is unable to continue providing the EMS services necessary or desirable for East Hampton.

To that end, it is the consensus of the Task Force that:

1. East Hampton consider a plan by which, if necessary, EMS services become a distinct town department, joining the fire and police departments under the municipal umbrella. The primary reason for this recommendation is the hesitancy of the Task Force to relinquish all control of service and cost to an outside vender, a choice considered irreversible. The re-establishment of services under town auspices, due to dissatisfaction with the vender, would be prohibitive both financially and operationally.
2. The recommendation that EMS initiate as a distinct department is preferable, in the view of the Task Force, to preserve its unique dedication to providing EMS services in addition to ambulance transfers. Community outreach in the areas such as public first aid education and standby events is best served by a cohesive unit distinct from, yet

coordinated with, other town departments. Consider an organizational structure that accomplishes this.

3. Because the provision of EMS services is authorized by state “licensure” in the form of Primary Service Area (PSA), it is recommended that the town become familiar with the process, especially the timing, of transferring PSAs between entities.
4. Relative to budgeting and the future impact of transitioning from town grants to fully funded EMS operations, it is not practical to provide a precise budget outline at this time. However, by nature of the transition, it would appear that the final year of grant funding would be a base going forward. However, it is likely that operations under town auspices would require additional budget resources most likely in areas of personnel.
5. The Task Force suggests the Town Council authorize the creation of a group consisting of members of the Ambulance Association, Fire Department, Board of Finance, Town Council and Town Manager or his designee, to consider our recommendations and issue a proposed action plan to transfer ambulance services to the town should it become necessary to do so.
6. Consider creating a legislative initiative (perhaps in conjunction with other interested towns) to work with our State Representative and State Senator to establish state funding of ambulance services (Currently, there is no state funding,), as well as increasing EMS funding and billing rates.

Finally, the Task Force would like to thank our Town Manager, David Cox, and our Recording Clerk, Katrina Aligata, for their patience and assistance in moving our work along. The Task Force began its work with essentially “a blank piece of paper”, having no previously existing roadmap to follow, and with Dave’s and Katrina’s guidance we were able to chart a course which we believe provided a strong basis for this report. Furthermore, we wish to thank the East Hampton Ambulance Association for their constant willingness to provide assistance in understanding not only its particular operations but the state of EMS services statewide. And a hearty thank you to all the officials who gave up their evenings to meet with us and discuss their own EMS challenges, without whom this report would not have been possible.

East Hampton is a growing, vital community. It is so because of the desire of its citizens to work together cooperatively to make it a great place to live, work, raise a family, have fun and be part of a greater good. It is in this spirit that we offer this report.

Deb Cunningham

Dale Maynard

Tim Feegel

Pat Walsh

Rich Knotek

Jordan Werme

POSTSCRIPT

On February 24, 2025 (effectively the day this draft report was completed), Task Force members, EHAA Board Members and various officials received by email the Association's **Multi Year Plan 2025 – 2028**.

The Plan provides an overview of Association personnel and management, organizational structure, and insightful observations into its perceived strengths and weaknesses.

The Plan outlines “Plans for Growth” which are comprised of a relatively wide range of action items deemed to be critical in sustaining efficient service, good management oversight and improved financial outcomes. Furthermore, the Plan includes the results of a 23 question survey which polled ambulance personnel on their experiences and satisfaction with various aspects of their service.

In addition, and as promised, the Plan includes a proposed budget for the 2025 – 2026 fiscal year similar in format to the financial reports the Task Force has viewed previously, including notes and assumptions used in developing that budget.

Interested parties may review the Plan in its entirety, as its contents will not be presented here.

However, either coincidentally or by chance, many key recommendations in that report mirror our recommendations contained herein (although in greater detail). The commonality of thought as to the road forward helps to confirm our choice of the EHAA to serve East Hampton on the path forward.

RESOLUTION

East Hampton Town Council

A Resolution Establishing an Ambulance Task Force

WHEREAS, the Town of East Hampton is empowered by the Connecticut General Statutes to provide ambulance service and that service has been provided through the East Hampton Ambulance Association for more than 70 years, and

WHEREAS, the Town of East Hampton recognizes that the changing nature of the ambulance service and rising costs associated with that service have made it necessary to consider options for the future and to provide a planful way in which the future of ambulance service in the community will be addressed, and

WHEREAS, the Town Council desires to create and empower a task force of local officials and residents to examine, investigate and advise the Town and Town Council regarding the future provision of ambulance service.

NOW, THEREFORE, BE IT RESOLVED by the Town of East Hampton Town Council that a task force called the East Hampton Ambulance Task Force is hereby established as follows. The East Hampton Ambulance Task Force hereby established shall consist of at least six members who shall be residents of the Town appointed by the Town Council. Not more than four of the members will be members of the Town Council evenly divided by the political parties and two of the members will be members of the public with no official political designation or affiliation. If other members are appointed by the Town Council, balance shall be maintained among the parties and unaffiliated members to the extent possible, but the overall Task Force membership shall, at minimum, adhere to the minority representation clause of the Connecticut General Statutes. The East Hampton Ambulance Task Force shall conduct the work as outlined herein and shall provide a final report to the Town Council not later than December 31, 2024 at which time the East Hampton Ambulance Task Force shall be automatically dissolved unless further action by the Town Council is taken. The Town Manager shall be responsible for administrative support of the committee including keeping of minutes. The Task Force Chairperson and Vice Chairperson will be named by the Town Council and shall be of different political parties.

BE IT FURTHER RESOLVED, the East Hampton Ambulance Task Force shall be charged with evaluating options for the Town of East Hampton related to the future provision of ambulance service within the Town. Without


limitation, the Task Force should evaluate multiple models for provision of ambulance service, including, but not limited to, as a department of the Town government, an outside provider including a not for profit/non-profit, including the East Hampton Ambulance Association, or by a private company, or jointly with one or more other municipalities. The Ambulance Task Force shall issue one or more reports for consideration by the Town Council and the community. Said report(s) shall include an evaluation of the current method of provision of this service including statutory and operational foundations, human and equipment resources, costs and challenges; a discussion of options that have been reviewed and a synopsis of the Task Force determination regarding the options considered; a recommendation for provision of ambulance service into the future including important considerations for governance or contract language; an outline of a plan for transition as necessary; and a budget of the potential operational costs for the ambulance service in the five fiscal years commencing July 1, 2025. The Ambulance Task force may determine other items to be included in the Town Council report(s) as it deems appropriate.

Approved this 28th day of May, 2024.

TOWN COUNCIL

ATTEST


Dean Markham, Chairperson


Patricia Burnham, Town Clerk

Ambulance Task Force

S.W.O.T. Analysis

July 1, 2024

STRENGTHS

- Great group of people
- Possess vehicles and equipment
- Good response time
- Good facility
- Good location
- Dedication of East Hampton Ambulance Association to East Hampton (Local Control)
- Community Buy In

WEAKNESSES

- Instability of Revenue
- Regulations favor for-profit entities
- No fundraising by Association
- Managing hours of volunteers and paid employees
 - Burnout
 - Lack of opportunities
- Challenges for getting people/EMTs
- Organizational structure – Board with an extra tier
- Lack of equity among Town emergency services managers
- Cost of education and training being borne by individuals
- Too many standby events (no revenue)
- “Always done it” – avoid change
- Limited regional partnership opportunities
- Not seeking grant opportunities
- Unwillingness of taxpayers to pay
- Pay (per diem) not high enough
- Unpaid/underpaid staff including command
- Lack of understanding of public regarding cost of service
- Fewer volunteers

OPPORTUNITIES

- Alternative income streams
 - Fundraise
 - Fee for service
 - Other
- State intervention/adjustments to fees
- Sell service to private entity (appetite)
- Merge with Fire Department
 - New EMS system
 - Municipal oversight
 - Municipal Department
- Regionalization (with another non-profit)
- Coordination through State and regional organizations (CCM, COST, RiverCOG)
- Chatham Health District partner

THREATS

- Nervousness/Concern in the East Hampton Ambulance Association
- Nervousness/Concern in the community
- Privatization may impact response time and cost
- Interest from the private market to consume us
- State regulations
- Loss of local control (70 year institution)
 - Cost
 - Service
- Burden on taxpayers if becomes a Town Government entity/cost
- Association bankruptcy
- Loss of assets
 - Vehicles and Equipment
 - People
 - Sense of community
- Aging population
- Apathy and lack of understanding
- Officials not seeing financial change and shift in paradigm
- Federal/OSHA regulations
- Consolidation of overseeing hospitals (medical directors)

TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
MONDAY, JUNE 17, 2024

6:30 PM

TOWN HALL 2ND FLOOR MEETING ROOM #201

MINUTES

Present: Chairman Richard Knotek, Vice Chairman Tim Feegel, Jordan Werme, Deborah Cunningham, Patrick Walsh, and Dale Maynard with Town Manager David Cox, Donald Scranton, and Maddie Starr from the East Hampton Ambulance Association.

Absent: None

Call to Order: Chairman Knotek called the meeting to order at 6:30 P.M.

Adoption of Agenda: *A motion was made by Chairman Knotek to adopt the agenda.*

Introduction of Members: The members went around the room introducing themselves and giving a brief background.

Presentation by East Hampton Volunteer Ambulance Chief Donald Scranton Regarding the Recent History and Activity of the Ambulance Service: Donald Scranton and Maddie Starr from the East Hampton Ambulance Association attended the meeting to present to the task force members. The purpose of the Task Force is to look at the town's emergency services and how it will proceed into the future. The association celebrated their 70th anniversary last year. In 2003 to 2004, the ambulance association was located at the firehouse before they obtained its own facility in the town. The association has three ambulances and 1 Tahoe truck working at the ambulance headquarters. There has been a decline in volunteerism but an increase in call volume over the years that has become more extensive and takes a longer amount of time. The amount of training, courses, and tests that a volunteer needs to attend and pass to get certified is time consuming. In Connecticut, ambulance associations get 1 license every three years. If the association needed to get another license they would need to petition the state or would need to wait the three years. There have been commercial services obtaining or buying smaller ambulance associations. An example would be Hartford Health Care buying out the Hunters ambulance services in Middletown. These commercial services just want to make more money by purchasing or obtaining smaller ambulance services. The association would need to apply for the state rates to get approved for the billing side. The BLS rate for ambulances is \$960. Medicare and Medicaid both have pre-set rates that differ from the state rates and other medical plans.

In 2021, the association lost some volunteers in town since some were aging out and others left because of Covid. Mr. Scranton looked though the ARPA funding and approached the Town Council with a proposal for funding. A consultant was hired to investigate the organization of the ambulance membership and program. His report offered four options; one option being a per diem membership. Another option would be to reorganize the membership to see what can be cut

down and what can be bolstered. In April of 2023, the ambulance membership converted to per diem. In July of 2023, the association was awarded \$283,000 to purchase a new ambulance. The association was able to pay off the rest of the new ambulance with the ARPA money they were awarded. It was stated that the response time of the membership has gone down from 15 minutes for 8-9 minutes. The association also provides coverage for stand by events like Old Homes Day and Graduation. For the stand by events, there are two crews that work. The first crew responds to the incoming calls, while the second crew works the event. The membership helps the community by providing programs and information. The association holds CPR classes and training to members of the public, like daycare providers. The membership also responds to calls like car accidents and building fires, this helps to work cooperatively with the Fire and Police Departments. The states provide CPR dummies for the association to train with. There are 60 members in the Fire Department with 15 of the members being medically trained. The ambulance association is private, non-profit operating in a town owner building. The members are looking to figure out how to get funding for the association and have more volunteers join to increase the membership numbers.

What kicked off the task force was the association asking for more funding. The association used to be fully funded and fully volunteered. It was a volunteered paid incentive program. This program continued until the consultant came in for his study of the association. Mr. Scranton stated the hourly pay was looked into and it was decided to set the per diem pay at \$20 an hour. There was a proposal to ask the town to split what was in savings with the ambulance association to pay out over 10 years. The association did receive \$52,000 from the town over a two year span. It was stated that materials, supplies, and equipment are increasing in price, making it difficult or harder to purchase what the association may need. The association averages about 3 calls a day. The members cover 6 hour shifts that come out to 36-40 hours a week. Mr. Scranton discussed the recruitment strategy for the association. They advertise on social media, in the Rivereast, on the news, and by attending the prevention fair at school and in town. The state provides free community college EMT classes for prospective students wanting to become EMT's and join the association. It was suggested to look into cross recruiting with the Fire Department and to hold cooperative drills with the Fire Department.

The ambulance association covers the Haddam Neck section of the town of Haddam and in return the association gets compensation from Haddam ambulance association. The membership can bill for medical transportation, transport to LifeStar landing zones, and 'treat and release' calls. Refusals and cancellations are not able to be billed. Mr. Scranton stated that he would like to expand the life of the ambulances, so having three ambulances would help with that aspect. The challenges would be the funding and staffing or volunteers. There needs to be 10-12 volunteers to be on call. For a call to be billed, there needs to be two medically trained members in the ambulance going to the call. The proper team for responding to calls are 2 members and one paramedic. It was suggested to have the treasurer and consultant attend a future meeting to present and talk with the task force members.

General Discussion of the Task Force Goals and Next Steps: The task force members discussed the need to understand the challenges for whoever services East Hampton. The members read and reviewed the packet documents provided by the town manager. East Haddam has a regional program to provide service to five different towns. The towns are East Haddam, Haddam Neck, Lyme, Old Lyme, and Haddam. Recently, the Fire Department in East Haddam put out an RFP to include the ambulance in their new building. It was suggested to discuss the SWOT analysis first before strategizing. It was suggested for the members to think and plan for

the discussion for the next meeting. Every town in the state is responsible for submitting their own benchmarks. The determining factors for response time would be the population and geographical size of the town.

Discussion and Action on Future Meeting Dates: The members discussed when to hold the monthly meeting and whether there should be one or two meetings a month. It was decided to hold the next meeting on the first Monday of the month at 6:30 P.M. That would mean the next meeting would be held on July 1st in the Town Hall at 6:30 P.M. The members should do their SWOT evaluations and objectives for the next meeting.

Adjournment: *A motion was made by Chairman Knotek to adjourn the meeting at 8:41 P.M.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING
MONDAY, JULY 1, 2024
6:30 PM
TOWN HALL 2ND FLOOR MEETING ROOM #201**

MINUTES

Present: Chairman Richard Knotek, Jordan Werme, Deborah Cunningham, and Dale Maynard with Town Manager David Cox.

Absent: Patrick Walsh and Vice Chairman Tim Feegel.

Call to Order: Chairman Knotek called the meeting to order at 6:34 P.M.

Adoption of Agenda: *A motion was made by Mr. Werme, seconded by Ms. Cunningham, to adopt the agenda as submitted. Voted 4-0 in favor.*

Approval of Minutes:

- a. **June 17, 2024:** *A motion was made by Mr. Maynard, seconded by Ms. Cunningham, to approve of the June 17th, 2024 regular meeting minutes with the changes to add Ms. Cunningham as a second for the motion to adopt the agenda and to adjourn the meeting, to remove 'one option being a per diem membership', to remove 'over a two year span' and replace with 'in the 24-25 current budget year', to include all four options listed by the consultant stating 'the options would be part time paid staff (nights) and recruit, full time paid staff with supplemental volunteers, structure a consolidation with Middlesex, and structure a consolidation with East Haddam or other,' from the presentation by Chief Donald Scranton, and to remove 'regional program' and replace with 'mutual aid agreement' under General Discussion. Voted 4-0 in favor.*

Follow-Up Discussion from Meeting of June 17, 2024: Mr. Werme asked whether to members are supposed to be choosing between the four options spelled out by the consultant in their report. Or do the members need to vote for another option? The task force is going to be examining the possible issues with the association with clear eyes and a new perspective.

Discussion and Creation of S.W.O.T. Analysis of Emergency Services in East Hampton: The members discussed the S.W.O.T. analysis each members thought over before the meeting. Each point was discussed and added to the list of other items.

Strengths:

- Great Group of Volunteers & EMT's
- Vehicles & Equipment
- Good Response Time
- Good Facility & Location
- Association's dedication to East Hampton (Local Control)
- Good Community Buy In

Weaknesses:

- Instability of Revenue
- State Regulations Heavily Favor Profit Entities
- No attempt to fundraise to Offset Expenses
- Managing Hours of Volunteers and Paid
- Burnout, Lack of Opportunity
- Challenges for Getting People/ EMT's
- Organizational Structure
- Board with an Extra Tier
- Lack of Equity and/or Town Emergency Services Managers
- Cost of Education/ Training Being Bared by Individual
- Too Many Stand-By Events (No Revenue)
- 'Because we've always done it this way'
- Avoid Change
- Limited Regional/ Personnel Opportunity
- Not Seeking Grant Opportunities
- Unwillingness for taxpayers to pay
- Pay (per diem) not high enough
- Unpaid staff including command underpaid
- Lack of understanding of public, ex cost of service
- Fewer volunteers

Opportunities:

- Explore different alternate income streams, ex fundraising, fees for services, other
- State Intervention/ adjustments to fees
- Chatham Health as district partner
- Sell Service to private company/ entity to reduce costs
- Merge with FD and new EMS system
- Municipal oversight/ Department
- Efficiency in types/ number of vehicles
- Regionalization (with other non-profits)
- Coordinate through state organizations/ regional organizations (Com, cost, Rivercog)

Threats:

- Nervousness/ concern in EHAA & EH Community
- Privatization may impact response time & cost
- Interest from private market to consume
- State regulations
- Loss of local control/ 70-year institution
- Cost Earn
- Burden on taxpayers
- Association bankrupt
- Loss of assets, ex vehicle & equipment, people, sense of community
- Aging population
- Apathy/ lack of understanding
- Officials not seeing financial change & shift in paradigm
- Federal/ OSHA regulations
- Consolidation of overseeing hospitals (Med directors)

The members further discussed how to look at each option and apply it without knowing the points from the SWOT analysis. It was suggested to start looking at the other models within the state for other towns. The members should look at all models and possibilities for the future of the association. Canton and Coventry were examples of town where the FD and EMS are part of the municipality of their town. Those two towns would be good models to look at for possible information. It was suggested that the members talk to the members and retired members of both town's associations to gain more information and perspective for East Hampton's association. There was another suggestion to have a few members from Coventry attend a meeting to talk with the task force members. Another option was suggested to talk to towns where the Fire Department provides EMS services like Colchester and Cromwell. There was another suggestion to have a representative from an outside vendor who bought out an ambulance association to get that aspect of the models provided by the consultant in their report to the ambulance association. The members discussed picking one scenario first to focus on before exploring another scenario. That way the members won't be discussing all of the options at once and they can examine each option. It was suggested to get someone from a municipal scenario to come talk to the members then have a representative from Middlesex Hospital talk to the members after to discuss as separate options for scenarios. The members briefly discussed meeting at the ambulance headquarters to talk with the volunteers and consultant possibly before talking with the other members from the other towns and the representative from the hospital. The members want to get as many perspectives and aspects of the models options as they can before drafting their report to the town. The members discussed meeting with a municipal representative before going to the association to discuss and ask questions. There needs to be an examination and understanding of what others and towns are doing in the surrounding area. The members discussed the need to choose the option that would deliver the best results and outcomes for the town, the community, and the volunteers. A final plan of action was decided upon by the members. The members will invite other members and retired members from the neighboring towns and a representative from the hospital to attend the meeting and hold a discussion with the members. The members should formulate questions for the representatives for each option or model to gain more information and get answers. It was decided to look at the municipal inclusion and Fire Department inclusion options first to get a sense of how that option turned out for the town. Durham and Portland are serviced by hospitals, so representatives from one or both of those towns would be invited to a meeting to talk and discuss with the members. The Town Manager would contact the First Selectman from Durham about who would be able to attend a meeting to talk with the members. Portland is serviced by Hartford Healthcare and Durham is serviced by Middlesex.

Confirmation of Next Meeting Date: If the members want to keep the meetings to the first Monday of the month, the next meeting would be August 5th. Meaning there would be five weeks in between meetings. The members agreed there needs to be a meeting held before then. It was suggested to ask if the representatives would be available for July 15th and 17th at 6:30 P.M. to attend either meeting to talk with the members. Mr. Werme volunteered to draft questions for the members to ask the guests attending their meetings. He will share his drafted questions with the members to see if anything would need revising before finalizing. There would be one representative at one meeting each night. The task force needs to report their decision and findings to the Town Council by December, so the report would need to be drafted by October. The regular meeting will be held on August 5th while the special meetings will be held on the 15th and 17th of July.

Adjournment: *A motion was made by Mr. Werme, seconded by Ms. Cunningham, to adjourn the meeting at 8:36 P.M. Voted 4-0 in favor.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING**

MONDAY, JULY 17, 2024

6:30 PM

TOWN HALL 2ND FLOOR MEETING ROOM #201 AND VIA ZOOM

MINUTES

Present: Chairman Richard Knotek, Jordan Werme, Deborah Cunningham, and Patrick Walsh with Town Manager David Cox.

Absent: Dale Maynard and Vice Chairman Tim Feegel.

Call to Order: Chairman Knotek called the meeting to order at 6:31 P.M.

Adoption of Agenda: *A motion was made by Mr. Knotek, seconded by Ms. Cunningham, to adopt the agenda as submitted. Voted 4-0 in favor.*

Approval of Minutes

- a. July 1, 2024:** *A motion was made by Mr. Werme, seconded by Ms. Cunningham, to approve of the July 1st, 2024 regular meeting minutes as submitted. Voted 4-0 in favor.*

Discussion with the Town of Durham Regarding Ambulance Service: Laura Francis, the former First Selectman, joined the meeting via zoom to talk with the task force members. Ms. Francis was in office when the change was being discussed and initially made. She stated that the solution was elusive since the town and ambulance members were emotionally attached. It is a matter of time and commitment for the volunteers in the ambulance service. The town had a strong working partnership with Middlesex Hospital before the change took place. It was stated that the town didn't charge the residents that are being helped by the ambulance service. But that type of service couldn't keep up since the expenses were stacking up. Before the merge with the hospital happened, the ambulance in Durham was a private, non-profit organization. The town can't get an ambulance without a license from the state. The town decided to turn over the ambulance to Middlesex and obtain another license ahead of the transfer. These two conditions was what helped sway the hospital to enter into a 6 year non-profit contract with the town. Durham will need to renegotiate with Middlesex after the 6 years is up on the contract. The town has another 4 years left in the contract. There was a stipulation added into the contract to have a back-up crew in Durham 24/7 and a back-up vehicle if the ambulance is occupied or out of town for another call. The residential perception is a cultural and emotional change, but there is a lot of trust invested in Middlesex Hospital. Some of the residents have been patients at the hospital over the years, so there wasn't a huge leap of faith for the town or the residents. Middlesex has an R-5 license, EMS/ Ambulance has an R-2 license, and the Fire Department has an R-1 license in town. Ms. Francis didn't have the response times with her, but she can get them sent to the

members to review. The contract equaled the value of the new ambulance vehicle that was transferred over to the hospital. This change came with great economic cost for the town as well. The ambulance can go outside of town for other calls since they're a mutual aid partner. But there's a stipulation in the contract that Durham has a back-up vehicle for when the ambulance is occupied or called away. The town handed over the R-2 license to Middlesex during the change. The model the town had before joining with Middlesex was unmaintainable. Some of the ambulance members were approached to work with and be equipped by Middlesex. Some of the volunteers took the offer from the hospital and they were given a garage and office to work out of while on duty. But some of the volunteers preferred to respond from their homes. The ambulance building and garage can house the 24/7 back-up crew on-site. Durham has a volunteer Fire Department, they were unwilling and unable to take on the ambulance and the R-2 license. There were concerns from the town residents that Middlesex would go after them if they were unable to pay for their EMS services. But the town has a fund people can apply for while in a hardship situation to help pay for their EMS services. There have been no town funds used for that funding source. East Hampton would need to address that concern and aspect if the hospital route is chosen. There was no Town Council approval needed for turning the ambulance and license over to Middlesex Hospital since the ambulance association was private, non-profit. Ms. Francis stated that the transition was seamless and respectful, there was no negative reactions or responses to the transfer. There have been increased response on the Fire Department for the R-1 services. It was also stated that with local control comes greater responsibility. The contract with Middlesex Hospital would not have cost as much as a fully staffed municipal ambulance/ EMS association. The town entered into the contract in mutual agreement and incentives for both parties. The town gave the building to the 24/7 crew and performed the up-keep for the association. There is no oversight authority and the ambulance association didn't want to give up that authority to the town. The economics of paid staff didn't make sense and would be too costly for the town to maintain. The town would need to pay roughly one million dollars to fully staff the ambulance association. The task force members was wondering what happens at the end of the 6 years for the contract. The members were curious as to what happens with the rolling inventory and stock of vehicles. The ARPA grant gave the East Hampton Ambulance Association \$280,000 to pay off the new vehicle. The association also uses a town owned building. The task force members will keep looking into other options and will ask more questions. All of the information from Ms. Francis will factor into the report from the task force members to the Town Council.

Confirmation of Next Meeting Date: Next Wednesday the 24th at 6:30 P.M. there will be a meeting to talk with a representative from Portland where Hunters Ambulance joined with Hartford Healthcare.

Adjournment: *A motion was made by Ms. Cunningham, seconded by Mr. Werme, to adjourn the meeting at 7:44 P.M. Voted 4-0 in favor.*

Respectfully Submitted,

Katrina Aligata
Recording Clerk

TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING

WEDNESDAY, JULY 24, 2024

6:30 PM

TOWN HALL 2ND FLOOR MEETING ROOM #201 AND VIA ZOOM

MINUTES

Present: Chairman Richard Knotek, Dale Maynard, Deborah Cunningham, and Patrick Walsh with Town Manager David Cox.

Absent: Jordan Werme and Vice Chairman Tim Feegel.

Call to Order: Chairman Knotek called the meeting to order at 6:30 P.M.

Adoption of Agenda: *A motion was made by Mr. Maynard, seconded by Ms. Cunningham, to adopt the agenda as submitted. Voted 4-0 in favor.*

Discussion with the Town of Portland Regarding Ambulance Service: Tom Michalewski from Portland EMS attended the meeting to present and answer questions from the members. The EMS coordinates for Portland Fire Department and works with Hartford Healthcare full-time. Portland brought an EMS plan to the meeting with Hartford Healthcare. The EMS plan needs to be done every five years for municipal EMS associations since it is part of the State regulations. The Portland crew, Hunter's ambulance, and Hartford Healthcare is dispatched to Portland. The agreement between Hunter's ambulance and Portland has been in effect for three decades. R-1 is for the FD first responders that are automatically dispatched to Middletown. There are no full-time staff in the Fire Department, they're all volunteers. The ambulance through Hunter's has an R-2 license. The ambulance is paid by certain transports, calls, and by mileage. In the agreement, there is no cost to the town for their ambulance service. Portland doesn't have a contract for the ambulance service, they have a handshake deal with Hunter's and Hartford Healthcare. The town has been given assurances that nothing would change for Portland. Hunter's recently acquired the town of Southington and saved them about \$10 million on their emergency services. There was a labor dispute back in 2023 with Hunter's, but they held a big hiring period that had them fully staffed. There were some bills that have gone out for the ambulance service, but for the most part the expenses are covered. The response time is 8.9 minutes for high priority calls, 11.92 minutes for low priority calls, and 20 minutes for 80% of the calls. There are about 1,000 calls a year for the ambulance service. There is a population of 9,300 in Portland. The ambulance would be dispatched to the next district for any calls when it is available. That is how the ambulance dispatch system works and the organization is structured. There are three different dispatch centers and 4 emergency services that captures all of the calls and tries to compile data using that system. This system also helps to figure out why the response to a call was delayed. There have been no major issues with Hartford Healthcare and Hunter's for Portland. The ultimate threat for Portland would

be Hartford Healthcare and Hunter's not providing EMS services to the town. But the town has a good relationship with both entities. The ambulance services has great availability, access, and timeframe. There has been some complaints that the Fire Department doesn't always respond to calls in town. People are expecting that familiar face at a call. Hunter's makes most of their money with intercompany transfers and Medicare/ Medicaid transfers between facilities.

Confirmation of Next Meeting Date: The next meeting should be the municipalities that incorporated EMS as a town department. Coventry and Canton are the two towns that have their EMS included in their municipalities. It was suggested to reach out to a representative for the members' next meeting on August 5th. The members decided to invite a representative from Coventry to their next meeting.

Adjournment: *A motion was made by Ms. Cunningham, seconded by Mr. Maynard, to adjourn the meeting at 7:42 P.M. Voted 4-0 in favor.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING
WEDNESDAY, SEPTEMBER 12, 2024**

6:30 PM

TOWN HALL COUNCIL CHAMBERS #107 AND VIA ZOOM

MINUTES

Present: Chairman Richard Knotek, Dale Maynard, Deborah Cunningham, Jordan Werme, Patrick Walsh (arrived at 6:28 P.M.), and with Town Manager David Cox.

Absent: Vice Chairman Tim Feegel.

Call to Order: Chairman Knotek called the meeting to order at 6:33 P.M.

Adoption of Agenda: *A motion was made by Mr. Werme, seconded by Ms. Cunningham, to adopt the agenda as submitted. Voted 4-0 in favor.*

Approval of Minutes

- a. **July 17, 2024:** *A motion was made by Ms. Cunningham, seconded by Mr. Maynard, to approve of the July 17th, 2024 regular meeting minutes as written. Voted 4-0 in favor.*
- b. **July 24, 2024:** *A motion was made by Ms. Cunningham, seconded by Mr. Maynard, to approve of the July 24th, 2024 regular meeting minutes as written. Voted 4-0 in favor.*

Discussion with the Town of Coventry Regarding Ambulance Service: Pete Bayers is the Fire Chief from Coventry. Their town ambulance association is a part of the Fire Department and incorporated into the town department. They were short on staff for the ambulance association, so the town took it over and merged three town departments into one. There were two volunteer fire departments in town. One was Coventry Volunteer Fire Association who was providing the ambulance service. The other was the North Coventry Volunteer Fire Department. Those two departments were merged together with the short-staffed ambulance association within the town. With the new department, it required to have two EMT's five days a week for ten hours a day. When COVID happened in 2020, the volunteer numbers decreased significantly. With that outcome, the hours and pay rate were increased by small amounts. By this year, the town hired their own staff to fill out the membership for the departments. Currently, there are four full-time town staff and nine part-time town staff that can work up to 29 hours per week. Increased the EMS and EMT member numbers. Haven't initiated the student housing program for this year. The student would volunteer for 12 hours a month and the cost for the program would be around \$244. The full-time staff can work up to 37 hours a week. They can cover North Windham and Manchester if needed. There were over 900 EMS runs and 75 car crashes. It would be impossible to staff the ambulance with volunteers around the clock every day. The town took over the fire departments in 2017 to combine them into one department. The staffing was doubled with the combining of the three departments. Went from 15 minutes to under 8 minutes after joining into the one department. A survey was conducted and the residents stated they were willing to pay for an ambulance association in town. The department reports directly to the Town Manager. In May of 2023 the Fire administrator retired, so Mr. Bayer took over the responsibility of the role and became the administrator. There is an EMS division, a special ops division, a fire ops division, and a training division. There are three people that oversee each division, with one person undertaking two divisions to operate. The fire chief is advisory and town staff, so he wouldn't be able to volunteer. The town took over the finances for both fire departments. There is no fire board

anymore since there are officer's meetings held. The department needs an HR person and a marketing/recruiting/retention person. The town and fire department is looking for a person to help with those aspects for the fire department. There are some volunteers that are college students that are looking to broaden their horizons and utilize the fire department to help develop their future career aspirations. The community may not realize that the fire department isn't separate, they may not realize that both were combined. The fire departments and ambulance association participate and hold events in town throughout the year. Events such as Toy Drive, Touch a Truck, graduation, etc. Having the insurance companies pay out to the ambulance service would be a good avenue to pursue for getting funding and reimbursement for calls served. Transfers are more costly and not time efficient for the ambulance association. The ambulance vehicle would be out of service for the time to bring the patient from one hospital to the other. It would be effective and efficient to answer medical calls instead of performing transfers. The cost would be \$12 a call if they don't get many calls. But if they work a call on the ambulance, they're paid \$30 per call. The points are paid out annually and the money is paid out monthly to the members. The point system for EMS is the same for the ambulance association. July of this year, the amount went up to \$12.50 per call. The ambulance schedule is completely full, and they even started a backup list of volunteers. There are seven people that get the points while the rest are paid members of the association. Investigate what the town and the ambulance association have an 'appetite' for regarding the way to keep the ambulance service in town. The department has been awarded with high amount grants for the fire department and ambulance association.

Dave Whitty, a member of the public, wanted to say that his wife Liz retired from the ambulance association. She was with the association and a doctor for twenty years. It was suggested to have the commission members invite her to a meeting to talk with her to gain a different aspect of the departments. There was another suggestion to talk to other members and people connected to the association at a future meeting to investigate and discuss a different aspect and viewpoint. There are a few more entities the commission members want to talk to first in upcoming meetings before talking with the existing association members. This is to investigate every avenue available to the members. If the members have more questions, they can send them to the Town Manager to forward to Mr. Bayer. The next meeting could have a third-party company representative to talk with the commission members. This representative could be from Hunters or another third-party company of the like. The town has a duty to provide essential medical and EMS services to the town and the residents. A suggestion was made to see if Hartford Hospital or Middlesex could give the commission members an estimate for joining with them for the town cost.

Confirmation of Next Meeting Date: The next meeting date will be figured out and sent out to the members. The Town Manager needs to reach out to the next representative.

Adjournment: *A motion was made by Mr. Maynard, seconded by Mr. Werme, to adjourn the meeting at 8:11 P.M. Voted 5-0 in favor.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING**

WEDNESDAY, NOVEMBER 7, 2024

6:30 PM

TOWN HALL 2ND FLOOR MEETING ROOM #201 AND VIA ZOOM

MINUTES

Present: Chairman Richard Knotek, Vice Chairman Tim Feegel, Dale Maynard, Deborah Cunningham, Jordan Werme, Patrick Walsh, and with Town Manager David Cox.

Absent: None.

Call to Order: Chairman Knotek called the meeting to order at 6:30 P.M.

Adoption of Agenda: *A motion was made by Mr. Cunningham, seconded by Mr. Walsh, to adopt the agenda as submitted. Voted 6-0 in favor.*

Approval of Minutes: September 12, 2024: *A motion was made by Mr. Walsh, seconded by Ms. Cunningham, to approve of the September 12, 2024 regular meeting minutes as submitted. Voted 6-0 in favor.*

Discussion with Hunters Ambulance Service Regarding Ambulance Service: Charles Johndro and Todd Jones attended the meeting via Zoom to present and answer questions from the members. Both are representatives of Hunter's Ambulance and work for Hartford Healthcare. Mr. Johndro is the medical director at Hunter's and Mr. Jones is the strategic developer for Hunter's and has been an EMT for the last 15 years. Hunter's serves Meriden, Berlin, Middletown, Middlefield, Wallingford, and more. The 2023 end of year totals turned out to be 32,000 calls. Hunter's is owned and operated by Hartford Healthcare. Hunter's Ambulance has robust operational capabilities for a wide array of incidents and cases, such as Covid or the wild fires happening in Berlin. They also use a tracker system for medical emergencies. They track the number of different medical calls that come in. There is great community opinion for Hunter's Ambulance. If Hunter's were to have a base in East Hampton, they would work and train alongside the local police and fire departments. It is not a 'one size fits all' approach to integrating and working with local services. Their policy is to bring the patients to the best facility for their needs and illness for a better chance of healing and recovering. The response time for high priority calls is 7 minutes and 59 seconds. The logistics of getting to East Hampton would need to be investigated, if the town enters into a contract and there is no base set up in town. The call volume and BLS vs ALS would be factors that need to be considered and figured out. There is a base location in Berlin that would be handling calls in Berlin. They would send a crew to cover Berlin while that crew is attending to the incident called in. There are 5 base locations that are open Monday through Friday with 28 active members. Hunter's would need to look at the call volume for East Hampton to determine if

a base location would be needed in town. A list of educational programs will be held to get more people who are interested in joining the association. Mobile Integrated Health programs could be a huge benefit for patients and the community for spreading more information. The transition from Hunter's to Hartford Healthcare had some struggles in the beginning, but the outcome was better for everyone. The benefits of being owned and operated by Hartford Healthcare would be getting expensive, updated equipment. An example of this would be all of the ALS ambulances getting video laryngoscopes to better intubate patients. There was discussion of looking into prevention strategies to help curb and/or prevent slips, falls, and accidents at the patient's house. The most money-making items for the ambulance association was stand-by events and non-emergency transports. Hunter's bills the health insurance for some calls, but they don't perform balance billing. Mr. Johndro stated that growing logistically and operationally is the key strategy for expanding in a smart way. The Task Force members can contact both representatives with any questions or concerns through email and phone. The members discussed what they learned after both reps left the meeting. It was stated that Hartford Healthcare would be an asset and that Hunter's knows how to handle calls and operate efficiently. East Hampton would be a linchpin to expanding into the surrounding areas like Marlborough and possibly Hebron. The medical equipment being provided and updated by HHC would be a huge benefit to the association. The members mentioned that they want to be sensible and investigate every option, factor, and aspect they can for this Task Force.

Confirmation of Next Meeting Date – November 14, 2024: The next meeting will be held on November 14th with Middlesex Hospital.

Adjournment: *A motion was made by Mr. Walsh, seconded by Ms. Cunningham, to adjourn the meeting at 7:41 P.M. Voted 6-0 in favor.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING
THURSDAY, NOVEMBER 14, 2024
6:30 PM
TOWN HALL COUNCIL CHAMBERS AND VIA ZOOM

MINUTES**

Present: Chairman Richard Knotek, Vice Chairman Tim Feegel, Dale Maynard, Deborah Cunningham, Patrick Walsh (Arrived 6:35 P.M.), and Town Manager David Cox.

Absent: Jordan Werme.

Call to Order: Chairman Knotek called the meeting to order at 6:30 P.M.

Adoption of Agenda: *A motion was made by Ms. Cunningham, seconded by Mr. Feegel, to adopt the agenda as submitted. Voted 4-0 in favor.*

Approval of Minutes: November 7, 2024: *A motion was made by Mr. Feegel, seconded by Ms. Cunningham, to approve of the November 7, 2024 regular meeting minutes as submitted. Voted 4-0 in favor.*

Discussion with Middlesex Hospital Ambulance Service Regarding Ambulance Service: Jim Santacroce from the Middlesex Hospital Ambulance Service attended the meeting to present to the members and answer questions. A lot of municipalities are going through the same pains and struggles as East Hampton. The town is ahead of the game with establishing the Task Force. Twenty years ago the billing structure of the business changed and altered the industry. The ambulance provides medical services in town. In 2013, the hospital started their own ambulance service and totaled 13,000 transports a year. Commercial ambulance services had their stresses and struggles, so they built their own service company. There are 12 ambulances, with 9 days and 3 nights on. There is one ambulance dedicated to Durham. Another ambulance would be dispatched to Durham to cover any incoming calls when the main ambulance is out on the original call. There are about 10,000 calls a year for Durham. 68% of the calls that come in are for transports. The ambulance service is provided to the town at no cost. There is a 6 year agreement with three years left. The ambulance service is operating at a \$400,000 loss. The call volume and para mix may be a deciding factor for getting any sort of agreement for the town. The state voted not to raise the rates for the ambulance service for operating in town. Medicare and Medicaid rates are set by the state for ambulance services. EMS bills for bringing patients to the hospital, but the service doesn't balance bill the patients either. The hospital uses 6 different ambulance services to help with the call volume. If the hospital would provide service to the town and would house more than one ambulance in town for calls and to cover surrounding towns. Medicare calls cost \$70-80, but it costs more than that to respond to that type of call. The hospital is getting 3 ambulances soon as back up services. It was stated that the hospital would need to investigate the data and town to make a decision if servicing the town would be the right move. Evaluate for the proposal for contracting with the town after being approached to be the dedicated ambulance service. There is a paramedic school that will be held for people interested in joining the service. There will be another course taught in Spring for more prospective paramedics to join. They are also looking

into providing EMT courses run by the state and aiming to start next year. There was discussion of getting a schedule created and filled for ambulance members to stay on track and keep organized with the personnel and manpower of the ambulance service. The members discussed the ambulance service membership pertaining to paid/unpaid, per diem, and volunteer staff. It was suggested to look into the growing pains and successes of other towns going this particular route for their ambulance service. If the hospital were to take over the local ambulance association in town, they would need to operate normally for 6 months before making changes. The hospital ambulances and crews do standby events and activities, kind of like what East Hampton does, in Durham.

Confirmation of Next Meeting Date: The members discussed the next two meeting and which dates would work for the members. It was suggested by the members to discuss everything they have learned so far at the next meeting and then for the meeting after that to go talk with the existing ambulance service to get some answers. The members were tasked with formulating questions and discussion ideas for the next meeting. The members discussed two dates before deciding on the next meeting to be held on Monday, November 25th at 6:30 P.M.

Adjournment: *A motion was made by Mr. Feegel, seconded by Ms. Cunningham, to adjourn the meeting at 8:00 P.M.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING**

WEDNESDAY, NOVEMBER 25, 2024

6:30 PM

TOWN HALL 2ND FLOOR MEETING ROOM #201 AND VIA ZOOM

MINUTES

Present: Chairman Richard Knotek, Vice Chairman Tim Feegel, Dale Maynard, Deborah Cunningham, Patrick Walsh, and with Town Manager David Cox.

Absent: Jordan Werme.

Call to Order: Chairman Knotek called the meeting to order at 6:31 P.M.

Adoption of Agenda: *A motion was made by Ms. Cunningham, seconded by Mr Feegel, to adopt the agenda as submitted. Voted 5-0 in favor.*

Approval of Minutes: November 14, 2024: *A motion was made by Ms. Cunningham, seconded by Mr. Feegel, to approve of the November 14, 2024 regular meeting minutes as submitted. Voted 5-0 in favor.*

Review of Information to Date and Planning for Discussion with East Hampton

Ambulance Association: The members discussed everything they learned from each representative at each meeting. Questions, concerns, and comments were brought up and discussed by the members to bring to the next meeting with the existing Ambulance Association members. The members first met with Donald Scranton from the Ambulance Association to get an overview and feeling of what the association would be looking for from the investigation by the Task Force. The members then met with some towns, organizations, and hospital providers at the meetings held after the initial meeting. The pros and cons for each town, organization, and hospital were reviewed and discussed by the members. Coventry has a 'handshake' agreement with their EMS/ Ambulance Association and have three more years with that agreement. Durham has their own hub in town for housing ambulances and staff for full coverage of the town and surrounding towns. Middlesex hospital bills the insurance company of the patient and what is not covered is balanced billed to the patient. How would integrated medcare be incorporated into the service? This was on question that was brought up to ask before making a decision. Hunters Ambulance provides service to Portland, Middletown, Middlefield, and other surrounding towns. Hunters is part of Hartford Hospital ambulance service. The East Hampton Ambulance Association hired a consultant that has drafted a report of what could be done and what direction the association could go in for a better future. The members would need to find out how much would be needed to pay for the chosen ambulance service method. Another question the members came up with was, are we getting what we need for the ambulance service. The members need to get the year-to-date

financial information before the next meeting to help figure out the best option. There was a suggestion to hear comments and feedback from the Ambulance Association members and the board members about what they think should be done and which option should be chosen. There was discussion of a regional non-profit ambulance association for the surrounding towns that would be run from East Hampton. The members suggested having the existing ambulance association prepare a presentation, like the companies and organizations, for the next meeting. That meeting should have the members from the ambulance board and the EMS chief in attendance for that meeting as protocol. Another couple of questions were brought up to ask at the next meeting. How does the short term set up for the long term? What does the board see for the future? What changes have been made with emergency services? The members suggested having the board talk on whether they see the East Hampton Ambulance Association go away in the future. The members need to look into the practical approach if changes will be made after the report is made and the recommendation is made by the task force. The decision will change what will happen at the next budget season. The companies need to investigate and review all data and reports before any agreement or contract is drafted. The requirements of the emergency services for the town and the community would be drafted by the Task Force.

Confirmation of Next Meeting Date: The members discussed holding the next meeting in mid-December. The meeting date will be decided and emailed out to the members. Mr. Markham stated that there is no need for an extension for the Task Force and that the members are within the timeframe set up for the task force.

Adjournment: *A motion was made by Mr. Feegel, seconded by Ms. Cunningham, to adjourn the meeting at 7:44 P.M.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING**

THURSDAY, DECEMBER 19, 2024

6:30 PM

TOWN HALL 2ND FLOOR MEETING ROOM #201 AND VIA ZOOM

MINUTES

Present: Chairman Richard Knotek, Vice Chairman Tim Feegel, Dale Maynard, Deborah Cunningham, Patrick Walsh, and Jordan Werme with Town Manager David Cox.

Absent: None.

Call to Order: Chairman Knotek called the meeting to order at 6:32 P.M.

Adoption of Agenda: *A motion was made by Ms. Werme, seconded by Mr. Feegel, to adopt the agenda as submitted. Voted 6-0 in favor.*

Approval of Minutes: November 25th, 2024: *A motion was made by Ms. Cunningham, seconded by Mr. Maynard, to approve of the November 25, 2024 regular meeting minutes as submitted. Voted 5-0-1 in favor with Mr. Werme abstaining.*

Discussion with East Hampton Ambulance Association Regarding Ambulance Service: The task force members held a discussion with the ambulance association members and the board members. The landscape for emergency services across the state and the country has been and will be changing. The members asked how it would work for East Hampton and how it would look for the future. The task force members looked into what other towns had for their emergency services. There were some towns with deals/ contracts with emergency services providers, some with third-party services, and others with corporations/ hospitals providing emergency services for their town. The members wanted to discuss what they learned from their various meetings with the association members. The Town Manager provided data and financial reports from the last few years for members to review. The EMS Chief, Donald Scranton, prepared a power point presentation for the members to explain what they are hoping for from the task force meetings. The members should absorb the information from the presentation to review and think about for the next meeting to discuss and decide how to go forward for the ambulance association. There are 42 active members with 5 currently on leave, all between 15-75 years of age with varying backgrounds and jobs/ school in their life. There are 30 per diem members, 11 incentive volunteer members, and 6 regular volunteer members. As a 911 organization, there is a greater focus on the patients and the community. There are training opportunities, community involvement programs, and classes held to further educate the citizens and residents in town. Mr. Scranton provided a list of all standby events the ambulance association covers in town and locally. The members discussed

the integrated healthcare concepts as part of the ambulance association services in the future. That aspect could be a great factor to bring to the association. The association has three ambulances that are equipped and ready to go on calls. They had 1,180 medical charts that are up-to-date. The 2024 set OEMS billing rate is \$960. The rate would stay the same for 2025. The billing collection rate for the 2024 calendar year (1/1/24-11/30/24) was 98.54%, while the fiscal year (5/1/24-11/30/24) rate was 104.01%. The response time decreased from 15 minutes to 8 minutes as the members steadily improved the operations side of the association. The annual basis for calls for the year was 1,227 with the primary response areas being East Hampton, Middle Haddam, Cobalt, and Haddam Neck with an automatic mutual aide agreement. The transport areas or destinations would be Marlborough Medical center, Middlesex Hospital, Hartford Hospital, Children's Medical Center, St. Francis Hospital, and Backus. The service calls have increased and would definitely need, at least, two more ambulances in town. The members discussed how much ambulances would cost to design and build. In 2023, a cab and chassis for a gas ambulance vehicle would cost \$490,000, according to how much Colchester paid for their ambulance. For a diesel ambulance, it would cost an additional \$15,000. A re-mount for an ambulance would cost \$302,000, while a 12-4-C would cost about \$420,000 without the equipment that goes inside it. The chief briefly discussed the association staffing and response organization and methods for responding to calls. The association doesn't always have a second crew available for back up and to cover calls. The concept of regionalization of the association was brought up and briefly discussed between the members. It was stated that East Haddam is open to the idea of the regionalization of the emergency services. The chief then described the future staffing the association would be looking for. It would be a 24/7/365 first due crew of two members. The third due crew members would work Monday through Friday peak times for the near term. For the long term, the staffing should be 24/7/365 first due crew, 24/7/365 second due crew, full time chief, and a FT/ PT assistant chief. The ambulance facility is an incentive for attracting people to join the association. Currently, the association has enough money to last another year and a half. The task force members should review all information from the meeting along with the data and reports from the Town Manager to discuss and make a decision at their next meeting.

Confirmation of Next Meeting Date: The members discussed when to hold the next meeting. They wanted some time in the new year. It was decided to have the next meeting on January 6th to discuss their next steps.

Adjournment: *A motion was made by Mr. Knotek, seconded by Mr. Walsh, to adjourn the meeting at 8:17 P.M. Voted 6-0 in favor.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING**

THURSDAY, JANUARY 6, 2025

6:30 PM

TOWN HALL COUNCIL CHAMBERS #107 AND VIA ZOOM

MINUTES

Present: Chairman Richard Knotek, Vice Chairman Tim Feegel, Dale Maynard, Deborah Cunningham, and Patrick Walsh with Town Manager David Cox.

Absent: Jordan Werme

Call to Order: Chairman Knotek called the meeting to order at 6:34 P.M.

Adoption of Agenda: *A motion was made by Mr. Feegel, seconded by Ms. Cunningham, to adopt the agenda as submitted. Voted 5-0 in favor.*

Approval of Minutes: December 19th, 2024: *A motion was made by Mr. Feegel, seconded by Ms. Cunningham, to approve of the December 19, 2024 regular meeting minutes with the change to reflect that the meeting was held at the Ambulance Association Headquarters. Voted 6-0 in favor.*

Discussion of Next Steps Regarding Ambulance Service: A finance committee was created by a couple of Ambulance Association board members to help provide more information and to have a committee set up for future use. There was a projection package created by Chairman Knotek to show the future finances of the association as it is operating currently. Chairman Knotek went through the package with the members so they could review and discuss all of the information provided. The income statements and financial information was reviewed to create the projection and to show how the future will look for the ambulance association. The information in the projection is to help figure out how much money the association would have if they kept operating alone. The other aspect of the projection was to see how much longer the association could go if they infuse town budget money. The rate of cash loss for the association would need to be figured out and that information would be sent to the task force members. The members discussed the depreciation of the equipment and vehicles the association uses. If the ambulance association stays the same, they would run out of money and shut down operations by March of 2027. The accompanying exhibit A and B were explained to the members. One option explained would be stating on 1/1/26, the town would contribute \$100,000 to the ambulance budget. An extra \$50,000 would be added since the current association budget is only \$48,000. The 2027 budget would be \$150,000 and in 2028 the budget would need to be \$260,000 for the association to stay operational and to pay for everything. The budget would need to increase to keep and maintain the investments and savings of the association. The association needs about \$20,000 each month to operate. It was

stated that the projection data doesn't account for the ambulance itself. The chief stated that they rotate the ambulance vehicles each month to moderate and maintain wear and tear on the vehicles. It was stated that the association should show the same care to every dollar as to every patient treated by the association. The members need to figure out the budget amount needed for the association and send it to the Town Manager by the end of February. It was suggested to review the investments and investigate turning that into cash to cut down on the risk on the association. The association board members will be reviewing the finances from the last 5 years to figure out what would be needed for the association in the future and where it should be headed. The association would still need assistance from the town. The members discussed drafting a survey for the residents in town to participate in to gather more information and data. The survey can determine what is needed and what isn't needed for the association in town. There was a previous anonymous survey taken by the association members while the consultant was performing their evaluation. The members decided to discuss and draft the report to the Town Council at the next meeting. The members need a few more details before writing the recommendation and report for the Town Council. The long term and short term options would need to be figured out as well. During the next meeting, the members should outline the points and the estimated costs that would go into the report that would be sent to the Town Council.

Confirmation of Next Meeting Date: The next meeting will be held on Monday, February, 3rd at 6:30 P.M.

Adjournment: *A motion was made by Mr. Walsh, seconded by Mr. Feegel, to adjourn the meeting at 7:33 P.M. Voted 5-0 in favor.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING**

MONDAY, FEBRUARY 3, 2025

6:30 PM

TOWN HALL COUNCIL CHAMBERS #107 AND VIA ZOOM

MINUTES

Present: Chairman Richard Knotek, Vice Chairman Tim Feegel, Dale Maynard, Deborah Cunningham, and Patrick Walsh (arrived 6:32 P.M.) with Town Manager David Cox.

Absent: Jordan Werme.

Call to Order: Chairman Knotek called the meeting to order at 6:31 P.M.

Adoption of Agenda: *A motion was made by Mr. Knotek, seconded by Mr. Maynard, to adopt the agenda as submitted. Voted 4-0 in favor.*

Approval of Minutes: January 6, 2025: *A motion was made by Ms. Cunningham, seconded by Mr. Maynard, to approve of the January 6, 2025 regular meeting minutes with no changes. Voted 5-0 in favor.*

Review of Update from East Hampton Ambulance Association: There have been no updates from the EHAA board of directors. The report is being drafted and will be sent to the task force members to review and discuss. The survey is out and data is being gathered. The budget is also being discussed and drafted.

Discussion and Determination of Final Recommendation and Attention to Drafting of Report: A report would need to be drafted about what the task force members learned and their recommendation on how to go forward with the Ambulance Association in East Hampton. The report would be sent to the Town Council for their review and approval. The members discussed and reviewed all their previous meetings with the services and providers. There is a commonality of service of cost for the providers and services. What option would be right for the East Hampton Ambulance Association. Outsourcing the emergency services could save the town money. There was also discussion of the possibility of trying to keep what East Hampton has currently before jumping into outsourcing. Also, take into consideration that the community would feel comfortable with the familiar and local people treating them. Essential services shouldn't be privatized. The members looked at the Coventry model and join the Ambulance Association and Fire Department. Concerns with the Board of Director's oversight and finances were brought up by the members to discuss. There have been morale issues, favoritism within the volunteers with hours, and bad financial support. The association needs to take a good look at staffing and restructuring. There have been no attempts for fundraising opportunities or other options for supplementary money. What would be the breaking point of the residents if the mill

**TOWN OF EAST HAMPTON
AMBULANCE TASK FORCE MEETING
REGULAR MEETING
THURSDAY, MARCH 3, 2025
6:30 PM
TOWN HALL COUNCIL CHAMBERS #107 AND VIA ZOOM**

MINUTES

Present: Chairman Richard Knotek, Vice Chairman Tim Feegel, Dale Maynard, and Patrick Walsh with Town Manager David Cox.

Absent: Jordan Werme.

Call to Order: Chairman Knotek called the meeting to order at 6:30 P.M.

Adoption of Agenda: *A motion was made by Mr. Maynard, seconded by Mr. Walsh, to adopt the agenda as submitted. Voted 4-0 in favor.*

Approval of Minutes: February 3, 2025: *A motion was made by Mr. Feegel, seconded by Mr. Maynard, to approve the February 3, 2025 regular meeting minutes with no changes. Voted 4-0 in favor.*

Discussion and Possible Action on Draft Report: The members received a multi-year plan from two members of the ambulance association board. The members didn't want to hold an in depth discussion about the report, that way the members can review it properly in between meetings. Chairman Knotek drafted a report between the last meeting and the current one. The members discussed having at least two voting members on the association board. The two voting members should have been added with the previous Town Council. There was a liaison position made and appointed to the board instead of the two voting members. That wasn't the approved and agreed upon deal that was made with that Town Council. It was suggested to hold a meeting with the Ambulance, Fire Department, and the Town Manager to facilitate the switch over of the ambulance association to a town department, if that route is taken. The conclusion of the draft report was read aloud by Chairman Knotek. The draft report was also emailed to the members to review for the meeting. The short-term and long-term goals were listed in the closing of the report. An in-house emergency services provider would be the most efficient in cost. But having the ambulance association become a town department and join the Fire Department would be the best option for the town and community. A third party provider would be less favorable since the control of cost wouldn't be easily monitored. The members discussed finalizing the drafted report to send to the Town Council for approval. The final draft would be discussed at the next meeting.

Determination of Next Meeting Date: The members discussed when the next meeting should be held. It was decided to have the next meeting on March 13th at 6:30 PM.

Adjournment: *A motion was made by Mr. Walsh, seconded by Mr. Feegel, to adjourn the meeting at 7:47 P.M. Voted 4-0 in favor.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk

rate would be increased. It was suggested to investigate any type of revenue aids or support like fundraising that came into the association. The \$260,000 operational cost of the association would be the lowest cost option compared to the other options and services. It was suggested that it may be more cost effective to make a town department and be a part of the town budget. There needs to be a new process and procedures for oversight with the association. The board of directors is working towards full transparency of financial spending of the association by having town have financial oversight. The members discussed the possibility of having one person in charge with oversight and control of both the Ambulance Association and the Fire Department, if they joined together as an option. It was suggested to investigate where the money is spent and how the money comes into the association. The members discussed having the monthly budget and expenses of the association sent to the Town Council to review and review where and how the funds are spent. There was discussion of what it would be like in the future for the town to take on the Association into the budget. There has been no explanation of why the third ambulance was purchased, there has been no statistics or data on the third ambulance from the board. The third ambulance was borrowed by Colchester and Marlborough. How much did the third ambulance cost the town and taxpayers. The candidate pool for volunteer members is shrinking nationwide due to factors such as pay, hours, etc. It was suggested that the members draft an outline of the main important points and ideas. The members discussed how to draft the outline and what to say in the draft to help members get started. An idea to bring the Fire Department into the discussion to gauge their willingness and interest in joining the Ambulance Association. It was decided to have Mr. Knotek draft the outline.

Determination of Next Meeting Date: The next meeting date will be decided and sent to the members.

Adjournment: *A motion was made by Mr. Maynard, seconded by Mr. Feegel, to adjourn the meeting at 8:25 P.M. 6-0 in favor.*

Respectfully Submitted,

Katrina Aligata

Recording Clerk