

<p><b>RUSH FIRE DISTRICT, BOARD OF FIRE COMMISSIONERS</b> <b>1971 Rush-Mendon Road, Rush, New York 14543</b> <b>Meeting Minutes May 20, 2025</b></p>
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Called to Order: 7 PM  
Pledge of Allegiance

Roll Call

**Present:** Commissioner Scott Goodman, Commissioner Bob Faugh, Commissioner Dale Sweet, Commissioner Michael Terzo;  
Chief Jon Faugh, Asst Chief Michael Terzo Jr., Asst Chief Dan Kwiecien; Fire Marshal Rick Tracy, Town Council Member Jeanne Morelli;  
Treasurer Aletha Steehler, Treasurer Roseli Pacheco, Secretary Kitty Stappenbeck

**Special Guest Speaker:** Frank Manzo, Chief/CEO of CHS; Steve Winner, Treasurer

Community attendance: approximately 25 town members attended, a few of whom spoke including the President of the Rush Fire Department and D.O. of the ambulance.

**Absent:** Commissioner Doug Platt; Asst Chief Dan Kwiecien

**Introduction of New Treasurer:** Roseli Pacheco

**Approval of Minutes:** April 15, 2025 meeting minutes

Commissioner Goodman prepared a document titled 'Rush Fire District Ambulance "At a Crossroads"' for residents and board members. It is attached to the end of the meeting minutes.

**Potential Merger with CHS: Frank Manzo**

Mr. Manzo started his presentation outlining the complexity of the ambulance service, the difficulty in getting volunteers, the compliance issues and training requirements for EMTs and Paramedics.

- Ambulance can continue to exist in RUSH, Rush members can become per diem employees OR volunteer through CHS
- The ownership would move to CHS, which means they would be responsible for maintenance, supplies, and operation of the ambulance.
- Ambulance will stay in Rush house
  - If a call comes in and Rush members want to respond, they will either receive volunteer credit or be paid through CHS on a per diem basis
- Rush members would have to go through CHS clearing
  - requirements are 10 hours per month either as a volunteer or per diem
- Logistics of payment for ambulance to be worked out
- Consensus from those who spoke: give the fire department 3 - 12 months to put plan in place to improve response time and EMT involvement in calls with identifiable deliverables

**Report From the Town:**

Councilmember Morelli reported:

The Rush Town Board has been busy reviewing and updating the Code with respect to the Residential R-20 and R-30 Code sections. The next workshop is scheduled for Monday, June 2nd.

**Liaison Town Board:**

Planning board documents - Fire District review not needed

2025-5P – Jacobs Lot Line Alteration – 4 Madelyn's Way

2025-6P – Sri Vidya Temple Green Parking Site Plan – 6970 E. River Road

2025-7P – Luke Horst Special Permit for Club – Rush Scottsville Road

**Chief's Report:**

The Chief reported on the number of calls and indicated that none involved significant property loss, severe injury or death

**Buildings and Grounds:**

**Vehicles:**

- Truck 582 is still not fixed by HarRob, The Commissioners are waiting for a quote from HarRob to fix 582 while it is decided what is needed in a new truck.
- Pick Up Trucks received
  - Radios programmed by Western NY
  - Striping and emblem can be added anytime

**Equipment:**

Asst Chief Dan Kwiecien had asked via email for an AED to be allocated to him for his vehicle. Commissioner Terzo instructed the Chief to retrieve the AED that FF Jim McNeil has and give it to the Asst Chief.

**Information Technology:**

The Secretary reported that the Scan Project is complete. Final tweaks have been made to instructions for scanning. These are posted on the wall behind the scanner. Testing has been completed and the programs are working as expected. The next step is to work with a laborer to work on scanning in their DOWN time.

**SOGs and SOPs:**

- The Capitalization Policy vote was put on hold till the June meeting
- Investment Policy 15-4: The secretary is finishing a revision of the 1995 policy and will have it ready for distribution prior to the June meeting

**Personnel:**

Update on Laborers - Commissioner Terzo made a motion to hire: Jared Hicks and Connor Phillips, seconded by Commissioner Sweet. Passed 4 - 0

*Executive Session: 8:30 pm*

Commissioner Terzo made a motion to go into Executive Session, seconded by Commissioner Goodman.

*Return to regular business:* 8:40 pm, motion by Commissioner Terzo, seconded by Commissioner Goodman

## **Publicity and Associations: No Report**

### **Physicals:**

- Body Scan Date: June 26, 2025; 2 - 7 pm, allow approximately 30 minutes for test
- Process to choose participants
  - Email will be sent to all members by Secretary
  - Member will send email to Commissioner Platt or Secretary Stappenbeck indicating interest
  - Deadline is June 10
  - Names will be pulled randomly by 2 Commissioners and the Secretary.
- Testing Prep: Nothing to eat for 6 - 8 hours prior to test time.
- Drink at least 32 ounces of water prior to the test to ensure a full bladder

## **Inventory, Inspection and Dinner: No Report**

### **Insurance/Budget/Attorney:**

Commissioner Sweet reported:

- Supplied the town with the Certificate of Liability Insurance insurance form for 6565 , the secretary has a copy on file.
- The pick up trucks were put on the insurance for \$75,000 each
- The spousal insurance was activated - this means that anyone riding in the pick up truck is covered in case of an accident even if not a Rush Fire Department member
- The life insurance for FF Pfersick was reported and paid out
- Commissioner Sweet reported on the questions asked at the April meeting:
  - once a recruit is recognized as a member (and they have had their physical), they are covered by VFBL
  - If a new member wants to ride the fire truck, they may do so as long as approved by the Chief, and they do not take a spot needed by a trained firefighter. In addition, if they have been trained on a specific job that is needed at the scene, the Chief can make an exception to let the new member participate and would be covered under VFBL - the key here is that the person must have been trained on the specific job - they do not need to wait until the end of their training to participate. Again, the Chief would make that decision.
  - In response to the question regarding how the insurance agent calculates the value of the firehouse: they do not use assessment value, they use rebuilding cost which considers construction, type of building, area of the country. A formula used by insurance companies is used.. Bottom line, we have replacement cost, so in case of damage, replacement cost would be paid out.
- The secretary asked that when Commissioner Sweet schedules an appointment to review insurance costs with our agent, that an email be sent to the secretary, treasurer and Roseli in case we are available to join the meeting

**Membership:** still need physical for newest recruit

**Treasurer Report:**

Voucher #'s: 2025-133 through 2025-157

Dollar amount: \$ 170,224.45

Vouchers signed by: Commissioners Terzo, Sweet and Faugh

Motion to pay bills as reported by Commissioner Terzo, seconded by Commissioner Sweet. Approved 4 - 0

**Other Financial Business:**

- Recommendation by Treasurer to move funds to NYCLASS as follows:

○ Notes Acct	Chase Bal \$	Trans to NYCLASS	Trans to Operating	Other
Reserve Equip	\$574,916	\$500,000		
Reserve Bldg	\$115,759	\$100,000		
Operating	\$441,000	\$200,000		
Savings	\$16,521		\$16,521	Close Acct

**Old Business:** Covered at meeting start regarding Ambulance merger

**New Business:** Covered in Treasurer's report regarding NYCLASS

**Adjournment:**

Motion by Commissioner Faugh to adjourn meeting, seconded by Commissioner Terzo. Meeting adjourned by common consent at 9:00 pm

Respectfully Submitted by the Secretary

Kitty Stappenbeck

5/30/2025

Note: The information that follows was provided by Commissioner Goodman and is relative to the guest speaker Frank Manzo regarding a possible merger of the Rush Ambulance with CHS Ambulance.585-261-4264

## Rush Fire District Ambulance

## “At A Crossroads”

The Rush Fire District Ambulance has provided a BLS ambulance since 1939. The ambulance is certified to provide Basic Life Support (BLS) level care by the NYS Bureau of EMS.

To provide ambulance service in New York State you need a Certificate of Need (CON) that is provided by the New York Department of Health.

### ■ **Key Differences between BLS and ALS Ambulance Services?**

The primary distinction between BLS and ALS ambulance services lies in the scope of care provided and the training of the personnel involved. BLS focuses on stabilizing patients and addressing immediate, non-critical needs, while ALS provides a higher level of care for life-threatening conditions.

The choice between BLS and ALS services depends on the patient's condition and the medical interventions required during transport. For instance, a patient with back pain may require BLS services, while someone experiencing chest pains would need ALS services. BLS is often the first line of response, and ALS comes into play when more advanced care is required. While both provide life-saving techniques during an emergency, they have key differences, including the level of care, the training required, the equipment used, and the treatment setting.

BLS level care consists of:

- Initial training is approximately 160 hours;
- Initial patient assessment and monitor vital signs;
- Oxygen therapy and airway management thru various methods;
- Hemorrhage control and wound care;
- Fracture and Spinal Injury care;
- Defibrillation for cardiac arrest, and CPR;
- In addition, we carry the following BLS medications
  - Epinephrine for allergic reactions
  - Albuterol for asthma attacks
  - Aspirin for chest pain
  - Narcan for Opioid overdoses

BLS ambulances are required to be staffed with at least one (1) Emergency Medical Technicians (EMTs) who are trained to offer vital pre-hospital care.

ALS level care consists of:

- Initial training is approximately 1,400 hours;
- Administer intravenous medications;
- Intubate patients to secure airways;
- Interpret electrocardiograms (EKGs).
- ALS services are vitally important for patients experiencing severe medical emergencies, such as heart attacks, strokes, or significant trauma. The advanced life support capabilities of ALS ambulances often make them the choice for high-acuity situations where immediate, intensive medical intervention is necessary.

## **Public Expectations**

The standard of care requires Advanced Life Support (Paramedic) to be dispatched to certain calls as triaged by the Monroe County / City of Rochester 911 Center utilizing the Emergency Medical Dispatch System (EMD).

EMD is currently done by specially trained personnel at the 911 Center on West Main Street in the City of Rochester. Dispatchers carefully question the caller in order to determine the type of emergency that exists, the geographical location of the incident, and the extent of any injuries suffered.

Dispatchers follow a standardized system with a special computer program-that prompts them to ask questions in a way designed to gain vital information quickly from callers.

Depending on their level of training, the crew on an ambulance can administer basic life support (BLS) or advanced life support (ALS) with the latter requiring a paramedic on board the ambulance. A Paramedic can administer more treatments to help a patient than a BLS certified crew member is permitted to administer.

The training to become an EMT is 160 hours and takes about 5-6 months to complete; a paramedic course takes one year. Both training programs require classroom and field time prior to taking a NYS certification examination. Additionally, there is considerable ongoing training is required to remain certified at either level.

While Rush FD Ambulance benefits from possessing BLS level certification, providing the community with 24 hours, all volunteer BLS coverage is ever challenging.

### **911 Responses Must Be Assured 24/7**

A local ambulance service must be absolutely committed to taking responsibility for their designated service area.

The first priority of every local ambulance service is a timely and guaranteed response to every 911 call.

Emergency Medical Services is not free; there are fixed costs for readiness. These include but not limited to personnel costs, supplies, insurance and vehicle/ station maintenance and mandated reporting. Guaranteeing an EMS response costs money.

### **How Do We Begin?**

The very word consolidation/merger tends to raise a level of anxiety in many. Some view it as the greatest money saver of all times or the best method to improve services; others the loss of their power or job.

Ironically, it could be none or all of the above. Simply, consolidation /mergers equal change and change is most difficult for many individuals and professions - especially those with strong traditions.

A merger is exactly what it implies. One department simply absorbs the other and provides protection to both areas. Although at the onset a merger might sound like a difficult way to combine resources; it is in fact the quickest, most practical, and often the least expensive method.

The principles of working together and sharing resources at the emergency scene can apply to the non-emergency arena as well.

In 2015, Henrietta Ambulance approached the Rush Fire District about a consolidation/merger. This was due to the fact the CHS was providing ALS level care and transport, and they did not have a CON for the town. At the time the commission thought it would be better to have Henrietta ambulance expand their CON to cover the town of Rush, which they did.

In 2022, Fire Districts in NYS were granted by law the ability to recoup some of the costs of providing ambulance service by a “fee for service” to bill insurance companies for ambulance service.

The Rush Fire District has made a resolution to bill for service. If we do not bill and a Paramedic provides care (ALS Intercept) on the Rush ambulance the patient will receive a bill from the ALS agency. This can average between \$1200-\$1500.

The Rush Ambulance receives about 250 calls a year. Out of those calls we transports less than 20%.

The Rush Fire District has 10 emergency medical technicians (EMT's) and only 3 chose to ride the ambulance. And of those 3 all work part-time at a paid ambulance service.

CHS is started on all ems calls in the Town of Rush. This was implemented to assure a response of an ambulance. The Honeoye Falls Mendon Ambulance is also started if CHS is unavailable or closer in the southern part of town.

### **What will a merger look like?**

- Rush members that would like to continue with the ambulance would become a member of CHS
- They would have to go through the clearing process at CHS
- The Rush Ambulance would have signage stating “Operated by CHS Mobile Health Care”
- No additional costs to the residents for the merger
- Minimal paperwork since CHS ambulance already has a CON that covers the Town of Rush.

### **What Will Happen If We Do This?**



There will always be patients to treat, and a host of other activities conducted by today's EMS environment.

Scarce resources (people and money) can be combined to provide the personnel, apparatus, and equipment needed to safely function at the emergency scene.

Initially, there will be those that feel they will lose power/control; but the issue isn't about power and/or control it should be about providing the highest level of service within the fiscal capabilities of the communities.

The Rush Fire District will become a first response fire agency. Which entails responding on the initial dispatch with emt's in a fire vehicle to provide emergency medical care. They will be equipped with all the BLS medication and gear to start the stabilization process of the patient

There have been discussions on providing a fire vehicle that can be taken home by emt's so they can respond immediately to the scene of the incident.

The ambulance stays in the Rush firehouse and will respond if there is crew. The crew will consist of CHS volunteers or paid personnel

The Rush Fire District employs civil service laborers that work Monday through Saturday 7am - 5pm. They are responsible for the general upkeep of the building and the readiness of the fire trucks and equipment. When Rush is dispatched for a fire or EMS call. The laborer has the choice of responding to the call as a mutual aid volunteer member. They go off the time clock and are covered by VFBL which is insurance for volunteer firefighters.

Some members have asked *"Why can't the laborer drive the ambulance"*? The district would like the laborers to stay in the Town of Rush to provide first response emergency medical services to the residents and visitors of Rush. The Town of Rush is surrounded by paid ambulance services that can provide advanced emergency medical services and transport in a timely fashion.

Further questions: email [commissioners@rushfiredistrict.org](mailto:commissioners@rushfiredistrict.org)

*This handout was available at the Board of Fire Commissioners Meeting on May 20, 2025.  
authored by Commissioner Scott Goodman  
K.Stappenbeck*