



March 14, 2024
Testimony of Commissioner Robert Tucker, FDNY
"Preliminary Budget Hearing FY26"

Good morning Chair Ariola and members of the Fire & Emergency Management Committee. Thank you for the opportunity today to discuss the Preliminary Budget for the New York City Fire Department for Fiscal Year 26.

2024 was a strong year for the Fire Department. Despite facing increases in both fire and emergency medical service calls, the FDNY's dedication to fire prevention, education, and outreach saved lives. Fire-related fatalities decreased by 25 percent compared to the prior year. We also saw a significant 67% reduction of deaths related to fires caused by lithium-ion batteries. Even one death is too many, but through the tireless work of EMS personnel and firefighters, 2024 was a safer year for New Yorkers.

We have been working with members of the Council for the last few years on measures to reduce the harm from fires caused by lithium-ion batteries. In 2023, the City experienced 18 fatalities related to this threat. I am proud to report that, in 2024, that number fell to six. So far this year, we have had no deaths related to fires caused by lithium-ion batteries.

This positive outcome is the result of numerous proactive steps that we took to address this issue. This included frequent outreach and safety messaging, aggressive inspections and enforcement,

and a targeted \$1 million dollar ad campaign. We launched the FDNY Lithium-ion Battery Task Force, which inspected nearly 600 e-bike shops in 2024, which was a 25% increase over the inspections from 2023. Members of the task force – including Fire Prevention Inspectors and members of the Bureau of Fire Investigation – issued 426 FDNY Summonses, 138 violation orders, 32 criminal summonses, and, in the most egregious cases, worked with our partners at the Department of Buildings to vacate seven dangerous buildings.

We are still seeing a large number of fires caused by lithium-ion batteries, but our safety messaging is getting through and we are seeing safer behavior from New Yorkers who use those devices. More people are charging and storing the devices outdoors where possible.

Yesterday, I declared 2025 “Fire Prevention Year” in New York City to mark the 100th anniversary of National Fire Prevention Week. In conjunction, I announced the release of Community Risk Profiles for all 59 community boards in the city, which provide a detailed analysis of each neighborhood’s emergency preparedness and vulnerability to fire incidents. Over the course of the year, we will focus on the top 100 most fire-prone blocks of the City, providing personalized fire safety education to residents on these blocks, including door-to-door outreach, community events, awareness campaigns. This is a team effort, though, and I know that our partners here on the Council will help us fight these challenges together. We will do everything possible to help keep communities safe.

Many of the councilmembers here today have hosted FDNY fire safety presentations in their districts. Fire and Life Safety Outreach was a top priority for the Fire Department in 2024, and it

will continue to be in 2025. The Fire Safety Education (FSE) unit is comprised of active duty members who are specially trained to conduct community outreach and educate the public with critical lifesaving strategies. They focus on fire prevention and perform a variety of targeted presentations, tailored to the audience of each respective presentation. In 2024, FSE conducted approximately 3200 presentations for more than half a million New Yorkers. This represented a 37% increase over the previous year.

We also have a very active Mobile Cardiopulmonary resuscitation (CPR) unit. In this unit, FDNY EMTs and paramedics teach New Yorkers from every corner of the city to perform compressions-only CPR. We have heard numerous stories about members of the public training on CPR in one of our programs and then successfully using the skills that they've learned to save a life in their own communities. One example that we like to cite took place in 2023 when two students from the FDNY High School in Brooklyn encountered a friend's family member who was unresponsive and gasping for air. Putting their CPR training into use, the students worked together to perform chest compressions, contact 911, and keep the patient alive while EMS responded and transported him to the hospital. These efforts – which are carried out in partnership with the FDNY Foundation – assist New Yorkers will helping themselves and their neighbors. You never know when you might be put in a situation to save a life.

I would encourage everyone to participate in a Mobile CPR program. I invite you to contact us to schedule fire safety and CPR events, as well as to schedule fire and EMS recruiting demonstrations for members of your communities. We are also always looking for New Yorkers to join our team.

We had great successes in the area of Recruiting and Retention in 2024. Last fall's firefighter recruitment campaign resulted in approximately 34,000 individuals filing to take the firefighter exam. The data-driven, targeted campaign – which we called All Heroes Welcome – was a comprehensive outreach program to reach potential firefighter candidates from every area of our city. We advertised in ten languages, using online and social media resources, traditional media such as radio and key community newspapers, as well as an aggressive advertising push on the transit system throughout the city. Of course, our most valuable recruitment assets are our own members, and for the firefighter campaign, we had an impressive group of active duty firefighters who spoke at schools, houses of worship, community meetings, career fairs, colleges, and block parties. I want to thank the Council for partnering with us on this campaign. A number of Councilmembers held events in their districts or helped us promote events that that we were hosting. I am encouraged by the fact that 8% of the filers were women.

Recruiting for a civil service exam is a process, and we know from previous cycles how important it is to keep our candidates interested and prepared, from taking the written exam, to completing necessary physical testing, to being sure that they enter the Academy in shape and ready to train. We use a variety of tools to engage candidates, including mobile academies, online and in-person information sessions, tutorials, workout sessions, outreach from mentors and fraternal organizations, and persistent communication to continue pushing them from one step in the process to the next.

We also had a very strong cycle of recruitment for Emergency Medical Technicians. We had our sights set on a goal of 3000 potential candidates and ultimately signed up about 3500. A majority of those test takers signed up to enter our FDNY EMS Trainee Program. These candidates will go through 16 weeks of training at the EMS Academy and become NYS certified EMTs. At a time when the entire country is facing difficulties in recruiting for EMS, we are literally creating our own EMTs.

Another positive development for the Department was the recent promotion of Deputy Chief Michele Fitzsimmons. After beginning her career with the Department in 2001, Deputy Chief Fitzsimmons is now the highest-ranking female fire officer in FDNY history. Her promotion shatters the glass ceiling for women everywhere and is an important reminder that promotional opportunities in the FDNY know no limits. She is a model for women and girls everywhere who will look to the path that she created to see themselves rising through the ranks.

A new challenge that we faced this past fall was a great proliferation of brush fires. Fighting brush fires is not unusual, but in late 2024, a prolonged drought and persistent dry conditions led to a drastic increase over a short period of time. To give you a sense of that increase, we had roughly 120 brush fires in October and November of 2023. That number more than quadrupled to more than 500 fires over the same period in 2024. We were proactive in our efforts to combat this surge, launching the Department's first ever Brush Fire Task Force. We used innovative approaches to keep the city safe, deploying drone teams to assist fire operations at active fires as well as in a preventative capacity, scouting areas of potential fires to ensure efficient responses. We were fortunate that these fires didn't cost the lives of any New Yorkers and were mostly

contained to isolated areas and did not cause widespread damage to buildings or homes. We continue to learn from our experience here and from the experience of our counterparts in Los Angeles and other parts of the country. As with any challenge that the FDNY faces, I have every confidence that our members will learn and improve and continue to keep the city safe.

Serving the people of New York is a responsibility that we take very seriously. I am grateful for the assistance and the partnership of the New York City Council and, particularly, for the support that we receive from Chair Ariola. Together, we will continue finding ways to make our city safer. I would be happy to answer your questions at this time.

Testimony of Commissioner Zach Iscol
New York City Department of Emergency Management
Preliminary Budget Hearing
March 14, 2025

Good morning Chair Ariola and members of the City Council. I am Zach Iscol, Commissioner of the New York City Emergency Management Department. I am joined today by First Deputy Commissioner Christina Farrell and Chief Financial Officer Christopher Blanco.

New York City Emergency Management has a big mission. We lead the development of the City's emergency plans and the coordination of multiagency responses to emergencies in New York City. We also educate the public about preparedness and advance long-term initiatives that reduce risk and increase the resiliency of New York City. Due to climate change, social and economic issues, international conflict, cyber threats, disease outbreaks, and aging infrastructure, new and worsening emergencies continue to threaten New York City. Bottom line, our job is to do everything we can to prevent emergencies, to ensure the city is prepared for them, to respond and manage them, and to then help the city – New Yorkers, businesses, communities, and neighborhoods – recover as quickly as possible.

Last year, NYCEM monitored 3,331 incidents from our Watch Command and responded to 786 planned events and no-notice emergencies across the city, deploying staff and equipment alongside our sister city, state, and federal agencies and private and non-profit sector partners. These included an extraordinary range of events and incidents. A 4.8-magnitude earthquake struck near New York City on April 5; a global IT outage involving CrowdStrike software impacted city governments, companies, and organizations around the world in July; and the fall of 2024 brought us the driest spell in the city's recorded history. The drought led to unprecedented challenges, including a two-week stretch between October and November in which the FDNY responded to 229 brush fires citywide—the highest amount in a two-week period in New York City history.

We activated and managed the City's Emergency Operations Center 19 times for severe weather, flooding, and other disruptions around the city, allowing us to coordinate with partners to address critical issues and maintain essential services. We also continued supporting the City's asylum seeker response operations as they evolved to meet changing needs throughout the year.

The people and communities of New York City are at the heart of what we do. In 2024, we launched the agency's first-ever citywide multilingual mailer to every residential address in the City to encourage all New Yorkers to sign up for Notify NYC, the City's official source for free emergency alerts. We introduced new emergency messaging channels on WhatsApp, Threads, and Facebook. We strengthened partnerships with youth, seniors, elected officials, and hard-to-reach communities by attending community meetings, supporting local events, offering hundreds of training sessions and Ready New York presentations, and engaging with local and ethnic media outlets. And our Community Emergency Response Team program welcomed 79 new volunteers last year, who now participate in community preparedness efforts and support first responders.

It is also our privilege to support other jurisdictions recovering from emergencies. NYCEM manages New York Task Force 1, one of 28 task forces across the country that make up the FEMA

National Urban Search and Rescue (USAR) Response System. The task force is comprised of NYCEM, NYPD, and FDNY personnel who are fully trained and equipped to respond to natural, technological, and human-caused disasters. In 2024, NY-TF1 deployed to two incidents. In September, 46 personnel and two canines from NY-TF1 deployed to North Carolina following Hurricane Helene. The team conducted extensive searches of areas impacted by infrastructure collapse, downed trees, mudslides, and heavy flooding. In October, 81 personnel and four canines from NY-TF1 deployed to Orlando following Hurricane Milton. The team assisted searching for survivors in collapsed buildings, providing emergency medical care, and conducting water rescues.

We are also innovators in leveraging the latest technologies to enhance emergency preparedness and response. In collaboration with the Drone Task Force, NYCEM deployed drones to monitor shark activity on City beaches during the summer, **culminating in a new Shark Protocol**. We initiated a pilot program to use robotic devices to inspect infrastructure in hazardous conditions, such as compromised buildings. NYCEM is also exploring how generative Artificial Intelligence (AI) tools can enhance preparedness, response, and recovery efforts.

NYCEM continues to coordinate the City's Recovery Working Group, which focuses on new priorities, including heat resilience strategies and temporary flood protection measures. In collaboration with the Mayor's Office of Housing Recovery Operations, NYCEM facilitated a Post-Disaster Housing Recovery Focus Group to identify strategies for rapid post-disaster housing support. NYCEM connects City partners to FEMA Hazard Mitigation Assistance (HMA) funding, a critical federal grant program focused on risk reduction, and provides the technical assistance needed to successfully apply for these programs, resulting in **hundreds of millions of dollars in grant awards** to support projects that make our city better prepared for future disasters.

And this is just a fraction of the work that New York City's emergency managers do.

Before detailing our budget, I would be remiss if I did not discuss the macro issues facing emergency management at this time, particularly funding. Federal grants make up the majority of NYCEM's budget, with 66% of our agency's budgeted headcount supported by federal funds. Over the last five years we have seen cuts to these federal grants nationally while also facing reductions in City funds. With falling funding and growing costs due to inflation and other economic factors, emergency managers across the country are being asked to do more with less.

I cannot think of any more critical investment in safeguarding New Yorkers during times of emergency than in the people who manage those emergencies. NYCEM staff are undercompensated compared to peers at similarly sized City agencies and their compensation does not account for the dual roles our staff must fill. In addition to their day-to-day responsibilities, staff rotate on 24/7 on-call teams, when they are responsible for immediately coordinating the City's response to an incident. This involved significant off-hours, weekend, and holiday work that is currently not accounted for in staff salaries. Our team has developed a comprehensive salary restructuring and advancement policy over the last year to provide career pathways and ensure we retain and grow the experience needed within the ranks of NYC Emergency Management to prepare for, respond to, and recover from future emergencies facing New Yorkers.

I want to take a minute and address another issue of pressing concern. The impact of cuts to federal spending and the federal workforce, especially at FEMA and other federal agencies we depend upon, should not be underestimated.

Across the country, emergency management 101 is that the local jurisdiction, whether a small town or county, a large city like New York, or a state, is in charge of managing an incident, but once that emergency exceeds their capabilities, they are able to turn to the state and then the federal government for support. Federal agencies provide unique expertise and capabilities that support local preparedness, response, recovery, surveillance, and mitigation. Agencies like the National Oceanic and Atmospheric Administration (NOAA), an irreplaceable partner for weather forecasting; the Centers for Disease Control and Prevention (CDC), which conducts national disease surveillance; and the Federal Communications Commission, which supports wireless emergency alerts – just to name a few. We will need to ensure that we can properly prepare for and manage the consequences of emergencies in the absence of the fully capable federal agencies that have supported emergency management efforts over the past several decades.

Historically, when an incident occurs that exceeds local or state resources, the Federal government will involve all necessary department and agency capabilities and organize the Federal response, coordinated by FEMA. While all emergencies start and end at the local level, federal agencies play a dominant role in several disaster scenarios, including civil defense, nuclear accidents, bioterrorism, and counterterrorism. But we are in the midst of a period of major change for the U.S. emergency management system, and we must prepare for a world where we cannot depend on the historical structure of state and federal support before, during, or after emergencies.

I want to be clear, this concern predates the current administration. Over the last few years, New York City and many other cities and states across the country had to manage one of the largest humanitarian crises with little help from the federal government.

So today, I am announcing a 90-day process that NYCEM will commence immediately to assess our risk so we as a city can better understand what we will need to do to mitigate and prepare for our new political context. NYCEM will use this process to outline solutions and propose novel approaches to grow our local emergency management capacity. This will include working with regional partners, the private sector, and the state to fill the gaps created by federal cuts to budgets, workforce, and agencies we depend upon. We will proactively develop an emergency management system that will lead the city's efforts to be better prepared for the foreseeable and unknown threats that lie ahead.

With that, let me now provide a snapshot of our budget for next fiscal year.

Our projected total Fiscal Year 2026 City Tax Levy expense budget is \$79 million. We rely on our City Tax Levy expense budget to support the agency's administrative, technological and operational costs.

The projected Fiscal Year 2026 City Tax Levy Personnel Services budget is \$12.9 million, which supports the 82 personnel lines paid directly through our tax levy funds. This includes \$1.2 million



in funding for 16 staff members dedicated to working on increasing communication and services to people with disabilities, access and functional needs.

Our projected Fiscal Year 2026 Other Than Personnel Services budget is \$66 million, which includes \$44.5 million for the agency's asylum operations. The remaining \$21.5 million covers all agency operating and administrative costs. This budget includes a significant portion of nondiscretionary funding. These funds are designated to cover our warehouse lease, utilities, and telecommunications costs including the maintenance and operations of our Emergency Operations Center and backup facilities. This money also supports our fleet and all additional equipment, supplies, and materials needed to run the agency.

I would like to close by expressing my admiration for our dedicated emergency managers, who in addition to their day-to-day roles are also responsible for immediately coordinating the City's response to an incident. They accomplish both roles with exemplary professionalism and service to their city. I am honored to lead this agency and I know that the expert team at New York City Emergency Management will continue to set the model for what emergency management should be.

Thank you for the opportunity to testify today. I look forward to working with the Council and I am happy to take your questions.

REBNY Testimony | March 14, 2025

The Real Estate Board of New York to The City Council Committee on Fire and Emergency Management Regarding the FY 2025 Preliminary Budget

The Real Estate Board of New York (REBNY) is the City's leading real estate trade association representing commercial, residential, and institutional property owners, builders, managers, investors, brokers, salespeople, and other organizations and individuals active in New York City real estate. REBNY appreciates this opportunity to testify on the New York Fire Department's (FDNY) preliminary budget.

REBNY deeply appreciates the work of the members of the FDNY, who keep the city's 1.1 million buildings and their occupants safe. REBNY and our members have long had a close working relationship with the men and women of the FDNY and look forward to our continued shared success.

As partners with the FDNY, the real estate industry shares FDNY's belief that fire alarm and other fire and life safety systems should be designed, installed, and maintained safely and in accordance with code. As part of this mandate, it is important that the process by which such systems are reviewed and inspected be both rigorous and efficient so that needed economic development projects can move forward.

In recent years, REBNY has testified at budget and other City Council hearings to ensure that FDNY has the resources it needs to establish and maintain a healthy fire and life safety oversight effort, including for plan reviews and system inspections. Most recently, in FY 2023 REBNY was pleased to work closely with the Council and FDNY to help provide additional resources for FDNY's Bureau of Fire Prevention so that they could hire additional staff.

Additional resources continue to be needed. Unfortunately, projects continue to face wait times for plan reviews and inspections that far exceed similar reviews at the Department of Buildings. These timeframes impede developers and contractors' ability to begin construction, complete buildings, or receive a Temporary Certificate of Occupancy, raising costs and delaying the opening of retailers, restaurants, offices, and affordable housing.

REBNY deeply appreciates our ongoing engagement with the FDNY generally and the Bureau of Fire Prevention specifically. Ensuring that the Bureau has the financial resources it needs to operate effectively and efficiently is a goal that we all should support.

We thank the Committee for this opportunity to testify on this critical issue.

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March 14, 2025

Testimony of WE ACT for Environmental Justice to the New York City Council Committee on Fire and Emergency Management, on March 14, 2025 regarding Fiscal Year 26 Preliminary Budget

Dear Committee Chair Ariola, and Committee on Fire and Emergency
Management:

WE ACT for Environmental Justice (WE ACT) is writing to testify on the need to invest in the City's future by funding environmental and climate policies and programs. We recognize and advocate for community-driven solutions that can remedy the institutionalized harms associated with unjust urban planning policies that have plagued communities of color for generations.

WE ACT is submitting this testimony to urge the Council to support critical investments in **cooling centers and emergency preparedness** to protect New Yorkers from extreme heat and climate-related emergencies.

Investment in Cooling Centers as an Emergency Management Method During Heat Waves

New York City faces increasingly severe heat waves due to climate change, posing serious health risks, particularly to seniors, low-income residents, and those with preexisting health conditions. Extreme heat is by far the deadliest climate-driven weather-related hazards, yet our investments have never been proportional. The Cooling Center program remains unfunded, relying on volunteer organizations and staff working regular business hours without heat-hazard specific training. It is imperative that we:

- **Preserve the \$24.8 million** currently proposed for cuts in the Mayor's budget due to asylum seeker forecast adjustments. While staffing levels were not severely impacted, further cuts to the Office of Emergency Management (NYCEM) risk straining capacity despite the undeniable [trajectory of increased extreme heat events](#). Global average surface warming has blown past the Paris Agreement limit of 1.5°C, a grave indication that we are likely to experience irreversible changes to Earth's natural systems and unimaginable climate disasters.
- Ensure that **NYCEM and the Department of Health and Mental Hygiene (DOHMH) collaborate** to determine the necessary overtime staffing hours required to keep cooling centers open **during evenings and**



weekends in the most vulnerable neighborhoods throughout the cooling season.

Investment in Emergency Communications Systems

As climate-related emergencies become more frequent, **effective communication systems** are vital to ensuring public safety. We urge the Council to allocate necessary resources for the **capital budget investment in emergency communication systems**, ensuring that timely alerts and information reach all New Yorkers during heat waves and other emergencies.

Conclusion

This Council must not put our emergency managers on the back foot against the most prolific silent killer of our time. Cuts to NYCEM do not reflect the foresight New Yorkers need from their leadership as we suffer heat waves, flooding, wildfires, air quality emergencies, and cold snaps in rapid succession. These investments are not optional—they are essential for protecting the health, safety, and well-being of all New Yorkers. We urge the Council to prioritize funding for cooling centers and emergency preparedness in the FY26 budget.

Thank you for your time and consideration.

Caleb Smith

Resiliency Coordinator
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Good afternoon.

- My name is Joe Gorman, and I am the son of a retired FDNY captain. I'm also proud to work for Friends of Firefighters, an organization founded with the mission of supporting New York City's Bravest. In the aftermath of 9/11, Nancy established this organization upon witnessing firsthand the immense emotional and mental toll on our city's firefighters. Since then, we have remained steadfast in our mission: providing free, independent, and culturally competent mental health support to active and retired FDNY firefighters and their families.
- New York City firefighters confront some of the most harrowing emergencies, facing trauma and life-threatening conditions daily. A recent anonymous survey conducted by SUNY New Paltz's Benjamin Center and Institute for Disaster Mental Health revealed more than 68% of first responders have experienced stress while 53% reported they have experienced symptoms of depression. Burnout and anxiety were among the other mental health challenges identified by respondents, and 38% reported to have symptoms of post traumatic stress disorder. Sadly, the suicide rate among firefighters is higher than the rate for the general public.

- 80% of respondents said that the stigma associated with mental health is an obstacle to seeking assistance. Culturally competent mental health resources remain scarce, and traditional employee assistance programs often fail to meet first responders' unique needs.
- Counseling is the foundation of our work, providing firefighters and their families with critical, confidential support free of charge. Because we do not accept insurance, our clients face no session caps, no limitations on frequency, and no restrictions on session length—ensuring they receive the care they need when they need it. Our clinicians at Friends of Firefighters are seasoned therapists with diverse backgrounds, all of whom have a deep understanding of the firefighter community and its values. They employ a variety of evidence-based approaches and tailored methods that allow us to address a broad spectrum of firefighter-specific mental health challenges.
- Today, I am here because we are at a critical point. The demand for our services has surged, nearly tripling since 2018. Last year alone, we provided nearly 4,500 counseling sessions free of charge, yet our fundraising efforts have not kept pace. Discretionary funding

accounted for less than 10% of our total direct service costs. That gap means we rely on private donations that are increasingly difficult to sustain. Without an increased investment, firefighters in need will be left without care.

- Our outreach work is the cornerstone of our engagement with the FDNY community, ensuring that firefighters are aware of and know how to access the mental health and wellness resources available to them. Our Outreach Coordinator traverses the five boroughs via public transportation, dedicating on average four days a week to visiting firehouses and engaging directly with members at their kitchen tables. Last year, Friends of Firefighters visited 350 FDNY companies to connect with members and provide vital information about our services. These efforts have been instrumental in fostering trust, strengthening relationships, and reinforcing our commitment to the well-being of the FDNY community.
- Friends of Firefighters respectfully requests \$633,000 to cover the costs necessary to deliver direct services and conduct critical outreach to New York City firefighters and their families. This funding will support a wide range of essential programs, including individual counseling, spouse support, peer support, wellness programs, and

our newly launched Bravest Children program. Thank you for your time.



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**Testimony of
Sakeena Trice, Senior Staff Attorney
on behalf of the Disability Justice Program
at New York Lawyers for the Public Interest
before the Council of the City of New York
Committee on Fire and Emergency Management
March 14, 2025**

My name is Sakeena Trice and I am a Senior Staff Attorney with the Disability Justice Program at New York Lawyers for the Public Interest (“NYLPI”). Thank you for the opportunity to present testimony today regarding public safety in New York City. On March 27, 2024, New York Police Department (“NYPD”) officers fatally shot Win Rozario, who was 19 years old, while he was experiencing a mental health crisis in Queens for which he had called 911 for help. How many more individuals must die by the hands of police before we finally adopt a more humane, peer-led, and person-centric approach to mental health crises?

NYLPI is deeply concerned about the City’s dangerous and illegal practices relating to the involuntary removal of individuals perceived to have mental illness diagnoses for psychiatric evaluation. We also oppose the Behavioral Health Emergency Assistance Response Division (“B-HEARD”) pilot in its current guise as it is deeply flawed and diverts resources desperately needed for a true non-police response to mental health crisis into a program that continues the criminalization of disability. NYLPI urges the City Council to mandate significant changes to B-HEARD so that it dispatches teams of peers—individuals with lived mental health experience—and emergency medical technicians (EMTs) who are not City employees, operates 24/7, routes

calls through 988, and above all, prioritizes the self-determination of people with mental disabilities.

THE CITY MUST WHOLLY TRANSFORM ITS RESPONSE TO MENTAL HEALTH CRISES BY ELIMINATING POLICE AND REPLACING THEM WITH A PEER-LED HEALTH RESPONSE

The City must join other cities across the country – including Los Angeles, San Francisco, Albuquerque, Denver, New Haven and many more – to **remove police** entirely from the equation, and **ensure that *healthcare* workers respond to *healthcare* crises**. According to [joint-research](#) by NYLPI and Human Rights Watch, there are at least 160+ emergency response programs nationwide that engage in crisis response activities without police as the initial responders or as automatic co-responders.

Closer to home, New York State is already taking action. The state legislators are working to pass a bill known as Daniel’s Law (S3670/ A4617), which would establish a statewide emergency and crisis response system where police are no longer the default first responders to health emergencies. Under Daniel’s Law, the state will only fund emergency response plans where EMTs and peers control the response to a health emergency, and the role of police would be strictly limited to situations involving imminent risk of serious physical harm. The bill currently has over 50 sponsors in the Assembly and the Senate.

Likewise, the City must establish a system whereby individuals who experience a mental health crisis receive appropriate services which will de-escalate the crisis and which will ensure their wellbeing and the wellbeing of all other New Yorkers. Only those who are trained in de-escalation practices should respond to a mental health crisis, and the most appropriate individuals to receive such training are health care providers and peers.¹ Police officers, who are trained to

¹ See Bazelon Center for Mental Health Law, “When There’s a Crisis, Call a Peer: How People With Lived Experience Make Mental Health Crisis Services More Effective,” (2024), <https://www.bazelon.org/wp-content/uploads/2024/01/Bazelon-When-Theres-a-Crisis-Call-A-Peer-full-01-03-24.pdf>; Martha Williams Deane, *et*

uphold law and order, are not suited to deal with individuals experiencing mental health crises, and New York's history of its police killing 20 individuals who were experiencing crises in the last nine years alone, is sad testament to that. Eliminating the police as mental health crisis responders has been shown to result in quicker recovery from crises, greater connections with long-term healthcare services and other community resources, and averting future crises.²

The scores of people experiencing mental health crises who have died at the hands of the police over the years is a microcosm of the police brutality around the world. Disability is disproportionately prevalent in the Black community and other communities of color,³ and individuals who are shot and killed by the police when experiencing mental health crises are disproportionately Black and other people of color. Of the 20 individuals killed by police in the last nine years, 17 – or greater than 80% -- were Black or other people of color. The City Council simply cannot stand by while the killings continue. Now is the time to remove the police as responders to mental health crises – and certainly we must all oppose the Mayor's efforts to increase the role and funding of the NYPD as it relates to people with mental disabilities. Lives are literally at stake.

[Correct Crisis Intervention Today – NYC](#) has developed the needed antidote. Modeled on the [CAHOOTS](#) program in Oregon, which has successfully operated for over 35 years without any serious injuries to respondents or responders – let alone deaths -- the CCIT-NYC proposal is positioned to make non-police responses available to those experiencing mental health crises in

al., “Emerging Partnerships between Mental Health and Law Enforcement,” Psychiatric Services (1999), http://ps.psychiatryonline.org/doi/abs/10.1176/ps.50.1.99?url_ver=Z39.88-2003&rft_id=ori%3Arid%3Acrossref.org&rft_dat=cr_pub%3Dpubmed&#/doi/abs/10.1176/ps.50.1.99?url_ver=Z39.88-2003&rft_id=ori%3Arid%3Acrossref.org&rft_dat=cr_pub%3Dpubmed.

² Henry J. Steadman, *et al.*, “A Specialized Crisis Response Site as a Core Element of Police-Based Diversion Programs,” Psychiatric Services (2001), http://ps.psychiatryonline.org/doi/10.1176/appi.ps.52.2.219?utm_source=TrendMD&utm_medium=cpc&utm_campaign=Psychiatric_Services_TrendMD_0.

³ Mayor's Office for People with Disabilities, “Accessible NYC” (2016), https://www1.nyc.gov/assets/mopd/downloads/pdf/accessiblenyc_2016.pdf.

New York City. The proposal avoids the enormous pitfalls of the City's B-HEARD pilot, which the City inaccurately refers to as a non-police model. The full text of the CCIT-NYC proposal can be found at <https://www.ccitnyc.org/ourproposal>.

THE CITY MUST ENTIRELY REVAMP THE B-HEARD PILOT AS THE PILOT AUTHORIZES EXTENSIVE POLICE INVOLVEMENT AND IS LIKELY TO CONTINUE OR EVEN INCREASE THE RATE OF VIOLENT RESPONSES BY THE NYPD

The City, via its Mayor's Office of Community Mental Health (formerly ThriveNYC), introduced a pilot program in 2021 that it contends is responsive to the need to cease the killings at the hands of the police of individuals experiencing mental health crises. Unfortunately, that is simply not the case, despite the City's glowing description of the program. Among B-HEARD's grim statistics are the following:

- In Fiscal Year 2024 (July 2023 through June 2024), over **70% of all mental health calls** in B-HEARD precincts were still **directed to the NYPD**, and B-Heard responded to only about **29% of total mental health calls** in the pilot area.
- Even when all kinks are ironed out, the City anticipates continuing to have about **50% of all mental health calls directed to the NYPD**.
- Moreover, **all mental health calls continue to go through 911**, which is under the NYPD's jurisdiction.
- The entire **program is run by the NYPD, the Fire Department and other City agencies**, with **NO role whatsoever for community organizations**. And there is not even any delineation of the lines of authority and communication among the various city agencies.
- **The crisis response teams are composed of EMTs who are City employees** (from the Fire Department) **who are deeply enmeshed in the current police-led response system**.

Peers do not trust these EMTs. The other team members are *licensed clinical* social

Page 4 of 10

workers. The licensure and clinical orientation requirements are unnecessary and they also preclude a vast array of potential candidates who have excellent skills and a long history of working with people experiencing crises.

- B-HEARD has ***NO* requirement to hire peers.**
- **The training of the teams does *NOT* require a trauma-informed framework, need *NOT* be experiential, and need *NOT* use skilled instructors who are peers or even care providers.**
- The anticipated **response time for crisis calls could be as long as half an hour**, and when last reported averaged over **fifteen minutes**,⁴ which is not even remotely comparable to the City's response times for other emergencies of 8 to 11 minutes.
- **The pilot operates only sixteen hours a day.**
- **There are no outcome/effectiveness metrics.**
- **There is no oversight mechanism.**

A comparison of the CCIT-NYC proposal, which is based on the CAHOOTS model with a stellar track record, and the B-HEARD program, which is not aligned with any best practices, is illustrated in the following chart:

⁴ Regrettably, the average response time was not even collected for the last reporting period.

Critical Attributes of a Mental Health Crisis Response System	CCIT-NYC's Proposal	NYC's B-HEARD Proposal
Removal of police responders	YES	NO (currently, around 79% of calls are still responded to by police, and even when all kinks are removed, 50% of calls will still be responded to by police)
Three-digit phone number such as 988, in lieu of 911.	YES	NO
Response team to consist of an independent EMT and a trained peer who has lived experience of mental health crises and know best how to engage people in need of support	YES	NO (licensed clinical social worker and EMT employed by the New York City Bureau of Emergency Medical Services)
Crisis response program run by community-based entity/ies which will provide culturally competent care and will more likely have a history with the person in need and can intervene prior to a crisis	YES	NO (run by New York City Police Department and other City agencies)
Peer involvement in all aspects of planning/implementation/oversight	YES	NO
Oversight board consisting of 51% peers from low-income communities, especially Black, Latinx, and other communities of color	YES	NO
Creation/funding of non-coercive mental health services ("safety net"), including respite centers and 24/7 mental health care to minimize crises in the first place and to serve those for whom crisis de-escalation is insufficient	YES	NO

Response times comparable to those of other emergencies	YES	NO (Most recently reported response time of over 15 minutes -- compared with average response time of 8 to 11 minutes for non-mental health emergencies)
Response available 24/7	YES	NO (Response only available 16 hours/day)
Training of the teams to use a trauma-informed framework, be experiential, and use skilled instructors who are peers	YES	NO

NYLPI urges the City Council to ensure that the money previously allocated for a non-police mental health crisis response be utilized solely for a truly non-police response, and to mandate substantial modifications to the B-HEARD program by including the critical components of the CCIT-NYC proposal.

THE CITY COUNCIL MUST ENSURE THAT NEW YORKERS HAVE ACCESS TO A WIDE RANGE OF VOLUNTARY NON-HOSPITAL, COMMUNITY-BASED MENTAL HEALTH SERVICES THAT PROMOTE RECOVERY AND WELLNESS, AS WELL AS A FULL PANOPLY OF COMMUNITY SERVICES, INCLUDING HOUSING, EMPLOYMENT, AND EDUCATION, BY ALLOCATING FUNDING FOR SUCH PROGRAMS

Since NYLPI was established nearly 50 years ago, we have prioritized advocating on behalf of individuals with mental health conditions, and we have consistently fought to ensure that the rights of individuals with mental health conditions are protected by every aspect of New York's service delivery system. Core to our work is the principle of self-determination for all individuals with disabilities, along with the right to access a robust healthcare system that is available on a *voluntary, non-coercive* basis.

We have long been on record opposing mandatory outpatient and inpatient treatment for failing to offer appropriate healthcare and insufficiently safeguarding the rights of persons with mental disabilities. In line with our continued advocacy for comprehensive mental health treatment in New York, NYLPI has released our latest report: Implementation of Kendra’s Law Continues to be Severely Biased⁵. The report outlines that there is no proof that Involuntary Outpatient Commitment is more effective than voluntary treatment. We make key, urgent recommendations for New York to discontinue use of Kendra’s Law and in no event expand its scope or reach, and in the interim, take proactive measures to eliminate racial bias from Involuntary Outpatient Commitment.

Quite simply, there is no place for coercion. Forced “treatment” is not treatment at all, and it has long been rejected by health practitioners -- to say nothing of the disability community – in favor of numerous best practices strategies that offer assistance even to those who have previously resisted offers of care.⁶ There are multiple less invasive models of care that New York City must invest in to avoid the tragedy and enormous cost of forced treatment. At the heart of these models are trained peers, who are ideally suited to implement effective harm reduction and de-escalation techniques, especially during crises.

We know how to help those with the most severe mental illness, but we fail to do so, instead providing services that are insufficient or not held to the highest accountability. We face complete system failure, yet we have done little to correct the failure and even point our fingers at those most affected by the system failure. We must stop the finger pointing and fix the system. We

⁵ NYLPI, Implementation of Kendra’s Law Continues to be Severely Biased (2025), <https://www.nylpi.org/wp-content/uploads/2025/03/Implementation-of-Kendras-Law-Continues-to-be-Severely-Biased-Report-1.pdf>.

⁶ See, e.g., de Bruijn-Wezeman, Reina “Ending Coercion in Mental Health: The Need for a Human Rights-Based Approach,” Committee on Social Affairs, Health and Sustainable Development, Council of Europe, Parliamentary Assembly, Doc. 14895 (May 22, 2019), <https://assembly.coe.int/nw/xml/XRef/Xref-XML2HTML-en.asp?fileid=27701&lang=en>.

must invest in innovative, voluntary health programs. And we must invest in supportive housing, rather than cart people off to a psychiatric ward or to jail.

Any proposal that facilitates the ability to force people into in-patient or out-patient “treatment” must be seen in the context of whom we’re entrusting to “remove” these individuals. As we now surely know all too well, the police, who are steeped in law and order, are not well-suited to deal with individuals with mental health concerns. The Mayor’s policy includes an outsized role for the police, and the City Council must halt it immediately.

Forced “treatment” must also be seen in the context of existing racial disparities. Of the 20 individuals killed at the hands of New York City police in recent years, 17 were people of color. This systemic racism also underlies the disproportionate prevalence of disability in the Black community and other communities of color.⁷ The racial disparities in the application of Involuntary Outpatient Commitment are also vast⁸.

While there is extensive literature supporting voluntary treatment, there is no support for the success of forced evaluation and treatment.

CONCLUSION

NYLPI respectfully requests that the City Council:

- Halt the Mayor’s policy of forcibly removing individuals perceived to have a mental illness diagnosis and perceived to be “unable to care for their basic needs,” but who do not present a danger to themselves or others.
- Mandate changes to the B-HEARD program to align it with the truly non-police, peer-led CCIT-NYC model.

⁷Mayor’s Office for People with Disabilities, “Accessible NYC” (2016), https://www1.nyc.gov/assets/mopd/downloads/pdf/accessiblenyc_2016.pdf.

⁸ NYLPI, Implementation of Kendra’s Law Continues to be Severely Biased (2025), <https://www.nylpi.org/wp-content/uploads/2025/03/Implementation-of-Kendras-Law-Continues-to-be-Severely-Biased-Report-1.pdf>.

- Ensure that New Yorkers have access to a wide range of non-hospital, community-based mental health services that promote recovery and wellness, as well as a full panoply of community services, including housing, employment, and education, by allocating funding for such programs.

Thank you for your consideration. I can be reached at [REDACTED] or stirce@nylpi.org, and I look forward to the opportunity to discuss how best to respond to the needs of individuals experiencing mental health crises in New York City.

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About New York Lawyers for the Public Interest

For nearly 50 years, New York Lawyers for the Public Interest (NYLPI) has been a leading civil rights advocate for New Yorkers marginalized by race, poverty, disability, and immigration status. Through our community lawyering model, we bridge the gap between traditional civil legal services and civil rights, building strength and capacity for both individual solutions and long-term impact. Our work integrates the power of individual representation, impact litigation, and comprehensive organizing and policy campaigns. Guided by the priorities of our communities, we strive to achieve equality of opportunity and self-determination for people with disabilities, create equal access to health care, ensure immigrant opportunity, strengthen local nonprofits, and secure environmental justice for low-income communities of color.

NYLPI's Disability Justice Program works to advance the civil rights of New Yorkers with disabilities. In the past five years alone, NYLPI disability advocates have represented thousands of individuals and won campaigns improving the lives of hundreds of thousands of New Yorkers. Our landmark victories include integration into the community for people with mental illness, access to medical care and government services, and increased accessibility of New York City's public hospitals. We prioritize the reform of New York City's response to individuals experiencing mental health crises, and have successfully litigated to obtain the body-worn camera footage from the NYPD officers who shot and killed individuals experiencing mental health crises. In late 2021, NYLPI and co-counsel filed a class action lawsuit which seeks to halt New York's practice of dispatching police to respond to mental health crises, and in the context of that lawsuit, seeks relief on behalf of individuals affected by the Mayor's Involuntary Removal Policy. We filed a companion lawsuit in 2024 on behalf of an individual shot within an inch of his life when experiencing a mental health crisis.

Testimony for 03/14/25:

FDNY Budget and Longer Advanced Life Support (ALS) Response Times in the Bronx

Good Afternoon, My name is Tyler Weaver. Before I begin, I would like to thank Committee Chair Joann Ariola, her staff, and the other Committee members for the attention they bring to FDNY issues that are of importance to everyone in New York City. I also want to acknowledge the very hard work that Firefighters and EMS personnel perform every day to keep the city safe.

When it comes to the 2026 budget, I believe some additional funding is going to be required to address the issue of the high response times for EMS. As the Committee members already know, these long response times impacted my family in December 2023 when our adult son Nicholas Costello suffered a cardiac arrest in the Bronx, and waited 19 minutes for an Ambulance. While that sad event is just a single data point, New York City's Local Law 119 official website data on Emergency responses shows that for the past 12 months, **Advanced Life Support Ambulances in the Bronx are taking more than 10 minutes to arrive 72% of the time.** If you do the math (see data chart on the next page), this means approximately 31,539 people in the Bronx over the past 12 months were forced to wait long times for the highest level of EMS care, (Paramedic-staffed Advanced Life Support units).

As the Committee Report for today's meeting indicates, EMS faces major issues with staffing, and this issue has been ongoing for years. When you dig into the reasons why staffing is a problem, the same main reason keeps popping up, namely that EMS personnel in NYC are underpaid, and that this then causes high turnover and difficulty in attracting and keeping the proper amount of people needed to staff units at the correct level. When one considers that an even higher number of EMS staff and ambulances would be needed to actually meet EMS response time performance targets, it ought to be clear that EMS funding and resourcing needs to be higher than the preliminary budget proposes. Other creative solutions that are being considered which do not involve more funding and/or higher pay are only going to go so far when attempting to squeeze more performance and efficiency out of the existing pool of staff and resources.

The Mayor's 2024 Management Report indicates on Page 80 that the criteria to measure how many cardiac arrest patients are revived by EMS annually has been changed to meet national standards. This means that cardiac arrest revival data from MMRs in years prior to FY23 are no longer able to be used and compared. Separately, the 2023 Mayor's Report indicated there were approximately 10,153 total confirmed non-trauma cardiac arrests in all of NYC that year. If this total number of cardiac arrests is similar each year in the City, then with the new reported revival rate of 20% for FY23 and FY24 using the new national criteria, this equals approximately 2,031 revivals and 8,122 non-revivals per year. Going forward, we will need to watch this 20% revival rate to see if it increases or decreases. **Regardless, research should be done to find out whether increased Ambulance response times, especially ALS, are a contributing factor or not in the general cardiac arrest revival rate.**

In closing, I call on the City to do even better and increase EMS funding, and EMS pay scales, to the level actually required to enable EMS to be staffed and resourced to enable them to arrive in a timely manner at all life threatening incidents, especially Advanced Life Support calls and for cardiac arrests.

Thank you.

Data Addendum:

The data table below shows a negative imbalance in the City's Advanced Life Support (ALS/Paramedic) Ambulance Response Times performance, between the Bronx and all the other boroughs, over the past 12 months in particular. Historical data going further back frequently shows a similar disparity. All data is taken from <https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page>. **Further research ought to be done to find out why City data shows the Bronx with such a markedly worse ALS response time performance.**

NYC Advanced Life Support (ALS) Ambulance Response Times for the past 24 months

Percent of Responses arriving in 10 minutes or less

(Higher Percentage is Better)

Month	Citywide Average	Bronx	Total # Bronx ALS Incidents	# Bronx ALS incidents Response Time > 10 minutes	Manhattan	Brooklyn	Queens	Staten Island
02/2025	41%	26%	3,212	2,387	46%	47%	37%	47%
01/2025	41%	23%	3,701	2,850	47%	46%	39%	52%
12/2024	43%	26%	3,309	2,439	45%	50%	41%	55%
11/2024	43%	29%	3,162	2,245	46%	48%	40%	51%
10/2024	40%	24%	3,349	2,545	42%	47%	37%	51%
09/2024	40%	22%	3,335	2,601	42%	48%	39%	48%
08/2024	42%	26%	3,755	2,779	43%	52%	38%	57%
07/2024	42%	25%	3,836	2,877	46%	52%	39%	53%
06/2024	45%	39.1%	3,382	2,060	51%	48%	39.0%	51%
05/2024	40%	26%	4,860	3,596	45%	41%	30%	50%
04/2024	40%	31%	4,490	3,098	47%	43%	33%	50%
03/2024	49%	44%	3,597	2,014	54%	52%	43%	53%
Past Months 1 to 12	42%	28%	43,988	31,539	46%	47%	38%	51%
02/2024	50%	47%	3,434	1,820	57%	52%	41%	55%
01/2024	47%	44%	3,975	2,226	55%	49%	40%	54%
12/2023	45%	38%	4,366	2,707	51%	48%	37%	51%
11/2023	49%	45%	3,622	1,992	55%	52%	41%	56%
10/2023	48%	42%	3,625	2,103	54%	51%	41%	52%
09/2023	47%	41%	3,482	2,044	52%	51%	40%	54%
08/2023	50%	45%	3,456	1,918	57%	53%	40%	57%
07/2023	49%	44%	3,466	1,951	56%	52%	38%	51%
06/2023	42%	36%	4,252	2,734	51%	44%	34%	53%
05/2023	39%	32%	5,337	3,651	47%	42%	31%	51%
04/2023	41%	32%	4,968	3,403	50%	45%	34%	50%
03/2023	41%	31%	5,261	3,609	51%	43%	33%	48%
Past Months 13 to 24	45%	38%	49,244	30,334	53%	48%	37%	53%

Color Key:

Worst in the City

2nd Worst in the City

NYC Council Committee on Fire and Emergency Management

March 14, 2025

Written testimony

Submitted by Helen Northmore

10 Supporting attachments follow this statement.

What will propel this City Council to take action to save the lives of their fellow New Yorkers? For at least the 5th year in a row, the *FDNY Fiscal 2026 Preliminary Budget Plan* includes a NYC Council statement that supports FDNY EMS pay parity. This year:

"The Council has consistently advocated for EMS pay parity to improve recruitment and retention, ensuring that EMS workers are fairly compensated for their critical role in emergency response." (p. 7, "Report on the Fiscal 2026 Preliminary Plan and the Fiscal 2026 Preliminary Capital Commitment Plan for the Committee on Fire and Emergency Management," Prepared By: Tanveer Singh, Analyst; Aliya Ali, Unit Head

However, for many years an informed Council has been **All Words** and **No Action** on the fundamental issue. The abysmally low pay of FDNY EMS personnel has resulted in its inability to recruit, train, and retain sufficient staff to man enough ambulances to lower response times to life-threatening emergencies.

As a result, the current overly long response times to life-threatening emergencies **CAN RESULT IN DEAD PATIENTS.**

On August 12, 2024, I sent to each NYC Council member via email and by USPS to both their 250 Broadway and district offices, a letter with an attachment. It included this statement:

"*NYC OpenData* shows that in 2023, the last complete calendar year for which this information is posted, **50,000+** New Yorkers, who were experiencing life-threatening medical emergencies, waited **11 or more minutes** for any emergency response. . . The enclosed gives the real numbers in each NYC Council District."

I added, Minutes Count for New Yorkers Experiencing Heart Attacks and Strokes: "Survival for patients with an initially shockable (heart) rhythm decreases 10% for every minute delay in defibrillation. . . When epinephrine is administered early, (< 5-10 min) after arrest onset, it improves neurologically intact survival." [Journal of Emergency Medical Services: https://www.jems.com/patient-care/improving-survival-from-cardiac-arrest-is-all-about-cheating-time/](https://www.jems.com/patient-care/improving-survival-from-cardiac-arrest-is-all-about-cheating-time/)

and

"Time is Brain Quantified: "In patients experiencing a typical large vessel acute ischemic stroke . . . in each minute, 1.9 million neurons, 14 billion synapses, and 12 km (7.5 miles) of myelinated fibers are destroyed." <https://www.ahajournals.org/doi/full/10.1161/01.str.0000196957.55928.ab>

On October 8, 2024 I sent to each City Council Member via email and by USPS to both their 250 Broadway and District offices another letter with attachments. It included this statement:

"From January through August 2024, ambulance units responded to an average of 99,021 medical emergencies per month. An average of **2,168** calls per month were for Segment 1, life-threatening medical emergencies, including patients in cardiac arrest. For an average of **758** of those patients per month, or **42.1%**, with Segment 1 emergencies, it took paramedics in Advanced Life Support ambulances as long as 10 to 20 minutes to reach them. Only paramedics can administer pre-hospital IV medications to patients. Only ambulances can transport patients to hospital ERs."

FDNY officials testified at the NYC Council [Fire and Emergency Management Committee](#) hearing on March 15, 2024. Regarding the number of EMS personnel to operate ambulances, it was stated, "Right now, our headcount is adequate."

However for a very long time, there have been **more ambulances than FDNY emergency medical personnel to staff them**.

On February 21, 2025 I sent to each member of this NYC Council Committee on Fire and Emergency Management, as well as to Speaker Adams, to Justin Brannan, Chair of the Council Finance Committee and to Gale Brewer, Chair of the Council Committee

on Oversight and Investigations via email and by USPS to both their 250 Broadway and district offices another letter with attachments. That letter included,

In 2024, the FDNY responded to 2,158 serious fires and emergencies, while the Emergency Medical Services responded to the vast majority of FDNY 911 calls. Just for segment 1-3 calls for life-threatening emergencies such as cardiac arrest and choking, EMS answered 627,599 calls. However, last year in the FY 2025 FDNY Preliminary Budget Plan, EMS was allocated only 16.2% of the FDNY budget. Regrettably last month, **in January 2025, the response time by either Fire or EMS to the majority of all segment 1 calls was 10 minutes or more.** Will you ensure the FDNY EMS is funded to have sufficient staff, equipment, and vehicles to handle the increased number of 911 calls for life-threatening emergencies?

The hugely disproportionate low EMS "first responder" pay is a barrier to recruitment, training and retention of experienced staff, and so to saving more lives. How will you ensure that more New Yorkers' lives are saved?

As no mayor has addressed the key issue that is the driving factor eviscerating the FDNY EMS, that is, **lack of pay equity**, **how in good conscience** can the NYC Council **fail to take action** on this continually ignored vital issue?

Attachments previously sent to the Council and attached to my written testimony:

- Questions for the FDNY for the March 14th NYC Council Fire & Emergency Management Committee Hearing. From p. 2 of February 21, 2025 letter.
- Go to the website below for this item. Is the FDNY EMS a "cash cow" for NYC? See a KPMG audit of the NYC H&HC, indicating a balance of \$452,145,000 due NYC for FDNY EMS services in just FY2024. "Basic Financial Statements and Supplemental Schedules", 6/30/24, p. 40.

Source: <https://www.abo.ny.gov/annualreports/PARISAuditReports/FYE2024/Local/NewYorkCityHealthandHospitalsCorporation2024.pdf>

- August 12, 2024 Letter to all 51 NYC Council Members.
- Number of NYC EMS Response Times of 11 Minutes & More to Life-threatening Emergencies with Hospital Transport (by NYC Council District January 1, 2023 - December 31, 2023).
- October 8, 2024 Letter to all 51 NYC Council Members.
- NYC Daily Fleet Report for September 16, 2024.
- "It's Not Just Traffic".

- February 21, 2025 Letter to All Members of the NYC Council Committee on Fire and Emergency Management and to Speaker Adrienne Adams and Council Members Justin Brannan and Gale Brewer.
- Just five examples of the many days in 2025 of the unreached target number for FDNY EMS ambulances in service. From:
<https://www.nyc.gov/site/operations/performance/fleet-report.page>
- January 2025 EMS & Fire 911 response times to Level 1 calls for each NYC borough from: "Local Law 119 Compliance".
<https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page>

- Every year the FDNY reports the number of deaths in NYC from fires. In January of this year, the average response time to all fires was under 7 minutes. In the same month, the majority of patients, who suffered life-threatening medical emergencies, waited 10 minutes or more for either **FDNY Fire or Emergency Medical Services (EMS)** to arrive. Has the FDNY counted the number of deaths each year that can be attributed to overly long response times to 911 calls for life-threatening medical emergencies?
<https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page>
- 911 calls for emergency medical help have increased. How many more daily FDNY EMS Basic Life Support (BLS) ambulance runs and how many more Advanced Life Support (ALS) ambulance runs were scheduled in 2024 than in 2023, are in 2025 than in 2024?
- On the Daily Fleet Report, the number of "in service" FDNY pumper and ladder vehicles hovers near or above 90%. The daily number of FDNY EMS ambulances frequently falls below 80%. Since BLS and ALS ambulances are staffed with differently certified personnel, either EMTs or paramedics, why aren't the 2 different types of EMS vehicles reported separately on the Fleet Report in the same way that Fire pumper and ladder vehicles are?
- How many certified Emergency Medical Technicians (EMTs) were employed by the FDNY EMS on December 31, 2023? How many certified EMTs were employed by the FDNY EMS on December 31, 2024? How many certified paramedics (not officers) were employed by the FDNY EMS on December 31, 2023? How many certified paramedics (not officers) were employed by the FDNY EMS on December 31, 2024?
- What is the exact number of FDNY EMTs and the exact number of FDNY EMS paramedics who departed the FDNY EMS altogether in the 2024 calendar year: through transfers to other FDNY bureaus including fire; through transfers to other city agencies, other than FDNY; through resignation from city employment altogether; and through retirement from city employment.
- What is the exact number of current FDNY EMTs, paramedics and officers who are eligible to transfer from the FDNY EMS to the FDNY Fire Bureau via the firefighter "promotion" (transfer) list? How many EMS staff does the FDNY plan to "promote" (transfer) via this list from FDNY EMS to Fire in 2025, 2026, and in 2027?
- How many FNDY EMS classes were held to train new EMTs in the 2024 calendar year? What was the target number of students for each class? How many were in each class? How many EMTs were actually graduated from each class in calendar year 2024? How many classes are scheduled for new EMTs in calendar year 2025? What is each's capacity?
- In calendar year 2024, how many new FDNY EMS paramedics were trained and appointed? How many FDNY EMS classes are scheduled to train new paramedics in the 2025 calendar year? What is the capacity of each?
- For each day in January 2025, separately enumerate how many BLS and ALS ambulance runs were cancelled because of lack of staff. How many of each ran for less than a full shift?
- A NYC H&HC June 30, 2024 audit noted that a balance of \$452,145,000 in third-party payor reimbursement was due NYC for services provided by FDNY Emergency Medical Services (EMS). That's tens of millions of dollars more than the \$427,052, 000 budgeted for its cost in the *FY 2024 FDNY Preliminary Plan*. <https://council.nyc.gov/budget/wp-content/uploads/sites/54/2024/03/057-FDNY.pdf>

There was a record high of 1,630,446 EMS responses to 911calls in 2024; how much money is the FDNY Emergency Medical Services projected to earn from them for NYC in FY2025?

[REDACTED]
Staten Island, New York 10301
August 12, 2024 (via USPS & email)

Honorable Adrienne E. Adams
City Hall
New York, NY 10007

Dear Council Speaker Adams,

Is it acceptable that thousands of NYC patients, with life-threatening medical emergencies, wait untreated for 11 or more minutes until paramedics in Emergency Medical Services' Advanced Life Support ambulances arrive?

NYC OpenData shows that in 2023, the last complete calendar year for which this information is posted, **50,000+** New Yorkers, who were experiencing life-threatening medical emergencies, waited **11 or more minutes** for any emergency response. City-wide and Borough-wide numbers and averages can sometimes obscure the situation. The enclosed gives the real numbers in each NYC Council District.

Minutes Count for New Yorkers Experiencing Heart Attacks and Strokes

"Survival for patients with an initially shockable (heart) rhythm **decreases 10% for every minute delay in defibrillation. . . When epinephrine is administered early, (<5-10 min)** after arrest onset, **it improves neurologically intact survival.**" *Journal of Emergency Medical Services:*
<https://www.jems.com/patient-care/improving-survival-from-cardiac-arrest-is-all-about-cheating-time/>

Time is Brain Quantified: "In patients experiencing a typical large vessel acute ischemic stroke . . . in each minute, **1.9 million neurons, 14 billion synapses, and 12 km (7.5 miles) of myelinated fibers are destroyed.**"

<https://www.ahajournals.org/doi/full/10.1161/01.str.0000196957.55928.ab>

This past June, did you and your fellow Council Members approve a city budget that appropriately funds the FDNY Emergency Medical Services to answer all 911 calls involving life threatening medical emergencies in a timely manner in each and every Council District? What will the NYC Council do to improve EMS response times in every Council District across the city? I would appreciate a reply.

Sincerely,

Helen Northmore

HN:bms

copy to: file

Enclosure: "Number of NYC EMS Response Times of 11 Minutes & More for Life-threatening Emergencies (with Hospital Transport -82) by NYC Council District"

"The goal of providing a paramedic response to at least 90 percent of ALS (Advanced Life Support) incidents within 10 minutes was a component of the 1996 Memorandum of Understanding that accompanied FDNY's takeover of responsibility for EMS operations." NYC Independent Budget Office, June 2013, p. 1.

<https://www.ibo.nyc.ny.us/iboreports/ems2013.pdf>

Number of NYC EMS Response Times of **11 Minutes & More**
to **Life-threatening Emergencies**
with Hospital Transport (82)

by **NYC COUNCIL DISTRICT**
from *NYC Open Data*

https://data.cityofnewyork.us/Public-Safety/EMS-Incident-Dispatch-Data/76xm-jjuj/about_data

January 1, 2023 - December 31, 2023

"With More Ambulances on the Streets Response Times to Serious Medical Emergencies Improve", NYC Independent Budget Office, June 2013, p. 4.

<https://www.ibo.nyc.ny.us/iboreports/ems2013.pdf>

From 1999 to 2011, "The median response time of the first ALS (Advanced Life Support, staffed with 2 paramedics) ambulance to arrive at the scene of a serious emergency fell . . . **to 6.5 minutes.** . . ."

Minutes Count

"Survival for patients . . . decreases 10% for every minute delay in defibrillation . . . When epinephrine is **administered early, (<5-10 min) after arrest onset, it improves neurologically intact survival."** *Journal of Emergency Medical Services*:
<https://www.jems.com/patient-care/improving-survival-from-cardiac-arrest-is-all-about-cheating-time/>

Time is Brain Quantified: "In patients experiencing a typical large vessel acute ischemic stroke. . . in **each minute, 1.9 million neurons, 14 billion synapses, and 12 km (7.5 miles) of myelinated fibers are destroyed.**"

<https://www.ahajournals.org/doi/full/10.1161/01.str.0000196957.55928.ab>

MANHATTAN - 2023

<u>NYC Council District</u>	<u>EMS Response Times of 11 & more Minutes*</u> <u>to Life-threatening Medical Emergencies in District, #s & %</u>	<u>Council Member</u>
NYC Council District 1	780 calls of 9,365 = 8%	Christopher Marte
NYC Council District 2	588 calls of 8,670 = 7%	Carlina Rivera
NYC Council District 3	1,281 calls of 13,708 = 9%	Erik Bottcher

* In this column, also reported for each Council District, is the **total** number in 2023 of calls that were categorized by the FDNY both initially and finally as Segment Level 1 to 3 life-threatening medical emergencies (with hospital transport 82). These include: cardiac arrest, unconsciousness, difficulty breathing, seizure, choking, anaphylactic shock, chest pain, obstetrical complication, major injury, major burn, etc.

Manhattan continued

<u>NYC Council District</u>	<u>EMS Response Times of 11 & More Minutes*</u> <u>to Life-threatening Medical Emergencies in District, #s & %</u>	<u>Council Member</u>
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NYC Council District 4	1,000 calls of 10,126 = 10%	Keith Powers
NYC Council District 5	554 calls of 5,220 = 11%	Julie Menin
NYC Council District 6	574 calls of 5,685 = 10%	Gale A. Brewer
NYC Council District 7	917 calls of 7,576 = 12%	Shaun Abreu
NYC Council District 8	2,294 calls of 15,210 = 15%	Diana Ayala Man/Bx
NYC Council District 9	1,750 calls of 12,373 = 14%	Yusef Salaam
NYC Council District 10	1,136 calls of 7,514 = 15%	Carmen De La Rosa

In 2023 in Manhattan there were 9,784 such calls, 21% of City-wide Segment 1-3 Calls (with hospital transport) with a response time equal to or greater than 11 minutes, for **an average of 27 per day**.

BRONX - 2023

<u>NYC Council District</u>	<u>EMS Response Times of 11& More Minutes*</u> <u>to Life-threatening Medical Emergencies in District, #s & %</u>	<u>Council Member</u>
-----------------------------	--	-----------------------

NYC Council District 11	1,351 calls of 8,079 = 17%	Eric Dinowitz
NYC Council District 12	1,256 calls of 8,388 = 15%	Kevin C. Riley
NYC Council District 13	938 calls of 7,699 = 12%	Kristy Marmorato
NYC Council District 14	1,442 calls of 9,805 = 15%	Pierina Ana Sanchez
NYC Council District 15	1,439 calls of 11,965 = 12%	Oswald Feliz
NYC Council District 16	1,523 calls of 11,463 = 13%	Althea Stevens
NYC Council District 17	2,021 calls of 14,218 = 14%	Rafael Salamanca, Jr.
NYC Council District 18	1,339 calls of 9,105 = 15%	Amanda Farías

In 2023, in the Bronx there were 12,390 such calls, 26% of City-wide Segment 1-3 Calls, (with hospital transport) with a response time equal to or greater than 11 minutes, for an average of **34 calls per day**.

* In this column, also reported for each Council District, is the **total** number in 2023 of calls that were categorized by the FDNY both initially and finally as Segment Level 1 to 3 life-threatening medical emergencies (with hospital transport 82). These include: cardiac arrest, unconsciousness, difficulty breathing, seizure, choking, anaphylactic shock, chest pain, obstetrical complication, major injury, major burn, etc.

QUEENS - 2023

<u>NYC Council District</u>	<u>EMS Response Times of 11 & More Minutes*</u> <u>to Life-threatening Medical Emergencies in District, #s & %</u>	<u>Council Member</u>
NYC Council District 19	668 calls of 3,413 = 20%	Vickie Paladino
NYC Council District 20	419 calls of 4,640 = 9%	Sandra Ung
NYC Council District 21	789 calls of 5,096 = 15%	Francisco Moya
NYC Council District 22	517 calls of 4,896 = 11%	Tiffany Cabán
NYC Council District 23	546 calls of 4,538 = 12%	Linda Lee
NYC Council District 24	640 calls of 5,481 = 12%	James F. Gennaro
NYC Council District 25	444 calls of 4,394 = 10%	Shekar Krishnan
NYC Council District 26	1,044 calls of 6,572 = 16%	Julie Won
NYC Council District 27	1,041 calls of 7,497 = 14%	Dr. Nantasha Williams
NYC Council District 28	1,275 calls of 6,986 = 18%	Adrienne E. Adams
NYC Council District 29	783 calls of 4,690 = 17%	Lynn Schulman
NYC Council District 30	601 calls of 4,016 = 15%	Robert F. Holden
NYC Council District 31	822 calls of 7,407 = 11%	Selvena N. Brooks-Powers
NYC Council District 32	888 calls of 5,172 = 17%	Joann Ariola

In 2023, in Queens there were 10,940 such calls, 23% of City-wide Segment 1-3 Calls (with hospital transport) with a response time equal to or greater than 11 minutes, for an average of **30 calls per day**.

BROOKLYN - 2023

<u>NYC Council District</u>	<u>EMS Response Times of 11 & More Minutes*</u> <u>to Life-threatening Medical Emergencies in District, #s & %</u>	<u>Council Member</u>
NYC Council District 33	899 calls of 7,263 = 12%	Lincoln Restler
NYC Council District 34	834 calls of 7,098 = 12%	Jennifer Gutiérrez Bklyn/Qu
NYC Council District 35	809 calls of 8,213 = 10%	Crystal Hudson

* In this column, also reported for each Council District, is the **total** number in 2023 of calls that were categorized by the FDNY both initially and finally as Segment Level 1 to 3 life-threatening medical emergencies (with hospital transport 82). These include: cardiac arrest, unconsciousness, difficulty breathing, seizure, choking, anaphylactic shock, chest pain, obstetrical complication, major injury, major burn, etc.

Brooklyn continued

<u>NYC Council District</u>	<u>EMS Response Times of 11 & More Minutes*</u> <u>to Life-threatening Medical Emergencies in District, #s & %</u>	<u>Council Member</u>
NYC Council District 36	1,191 calls of 9,604 = 12%	Chi Ossé
NYC Council District 37	1,532 calls of 8,056 = 19%	Sandy Nurse
NYC Council District 38	312 calls of 6,377 = 5%	Alexa Avilés
NYC Council District 39	364 calls of 4,676 = 8%	Shahana Hanif
NYC Council District 40	666 calls of 7,131 = 9%	Rita Joseph
NYC Council District 41	1,104 calls of 11,128 = 10%	Darlene Mealy
NYC Council District 42	1,920 calls of 12,014 = 16%	Chris Banks
NYC Council District 43	227 calls of 5,336 = 4%	Susan Zhuang
NYC Council District 44	194 calls of 2,780 = 7%	Kalman Yeger
NYC Council District 45	486 calls of 6,003 = 8%	Farah N. Louis
NYC Council District 46	836 calls of 5,729 = 15%	Mercedes Narcisse
NYC Council District 47	628 calls of 6,994 = 9%	Justin Brannan
NYC Council District 48	338 calls of 5,182 = 7%	Inna Vernikov

In 2023, in Brooklyn there were 12,213 such calls, 26% of City-wide Segment 1-3 Calls (with hospital transport), with a response time equal to or greater than 11 minutes, for **an average of 33 calls per day**.

STATEN ISLAND - 2023

<u>NYC Council District</u>	<u>EMS Response Times of 11 & More Minutes*</u> <u>to Life-threatening Medical Emergencies in District, #s & %</u>	<u>Council Member</u>
NYC Council District 49	804 calls of 8,095 = 10%	Kamillah Hanks
NYC Council District 50	581 calls of 5,903 = 10%	David Carr S.I./B'klyn.
NYC Council District 51	380 calls of 4,476 = 8%	Joseph C. Borelli

In 2023, on Staten Island there were 1,777 such calls, 4% of City-wide Segment 1-3 Calls, (with hospital transport) with a response time equal to or greater than 11 minutes, for **an average of 5 calls per day**.

* In this column, also reported for each Council District, is the **total** number in 2023 of calls that were categorized by the FDNY both initially and finally as Segment Level 1 to 3 life-threatening medical emergencies (with hospital transport 82). These include: cardiac arrest, unconsciousness, difficulty breathing, seizure, choking, anaphylactic shock, chest pain, obstetrical complication, major injury, major burn, etc.

The numbers in this document do not reflect **ALL** the calls for help and all the response times for life-threatening medical emergencies in each Council District in the 2023 calendar year.

The *NYC OpenData* website does not specify if the information about the initial response time is for the arrival of the first Emergency Medical Services personnel at the scene, or if the first response time given can include the arrival of FDNY firefighters, who can be dispatched to medical emergencies and can arrive before EMS. Firefighters can apply a defibrillator and do CPR, but only paramedics can medically assess patients, administer intravenous medications, intubate patients, etc., and transport them to the hospital.

So, by using the additional data filter of "incident disposition code "82", it is assumed that EMS arrived on the scene at some point. However, by using incident disposition code "82", the numbers here also **exclude** those patients with Severity Code 1-3 medical emergencies (life-threatening), who did not want EMS to transport them to the hospital.

The numbers here also **exclude** calls that were initially categorized as life-threatening, Severity Code 1-3, but later assigned different categories.

To view this EMS response time data online and more, for example, initial call type, dispatch time, travel time, incident dispatch area and zip code, go to the source: *NYC OpenData*:

https://data.cityofnewyork.us/Public-Safety/EMS-Incident-Dispatch-Data/76xm-jjuj/about_data

To find out the number of **ALL** calls for help about life-threatening medical emergencies, not limited by final incident severity code or transport to hospital, in each Council District:

Choose "Data" from the upper left-hand side of the webpage (next to "About").

From "Actions" (dark blue) on right side of the new webpage, choose "Query data".

Under "Filters" (near bottom of new webpage) "Select Column to filter":

- + Incident date time "is between" January 1, 2023 at 12:00 AM "and" December 31, 2023 at 11:59:59 PM.
- + Initial Incident Severity Code Level "is between" "1" and "3". (Enter numbers.)
- + City Council District "is" Enter number.

To find the number of all level 1-3 calls with **11 minutes or more** response times in each Council District, repeat the above with this added filter:

- + Incident Response Seconds "is greater than or equal to". Enter number 660 (seconds). For greater or less response times enter a different number of seconds.
For example, for a response time of 10 minutes or more, enter 600 (seconds).

[REDACTED]
Staten Island, New York 10301
October 8, 2024 via email & USPS

Honorable Adrienne E. Adams, Speaker
New York City Council
City Hall
New York, NY 10007

Dear Speaker Adams,

"Traffic" is not the only culprit in rising EMS response times. Take for example the variation in response times between fire trucks and ambulances. They all travel through the same "traffic".

In the first eight months of 2024, there were an average of 1,851 structural- and non-structural fires per month. For an average of **54 or 2.9%** of those fires per month, it took fire units as long as 10 to 20 minutes to reach them.

From January through August 2024, ambulance units responded to an average of 99,021 medical emergencies per month. An average of 2,168 calls per month were for Segment 1, life-threatening medical emergencies, including patients in cardiac arrest. For an average of **758** of those patients per month, or **42.1%**, with Segment 1 emergencies, it took paramedics in Advanced Life Support ambulances as long as 10 to 20 minutes to reach them. Only paramedics can administer pre-hospital IV medications to patients. Only ambulances can transport patients to hospital ERs.

Two basic components, within NYC government's control, affect response times. They are: the number and location of operational emergency vehicles, and sufficient personnel to staff them.

On the day the *Mayor's Management Report FY 2024* was released, September 16th, **93%** of the FDNY's combined target number for pumper and ladder trucks were in operation. In contrast, only **78%** of the FDNY's own target of 500 for Advanced Life Support- and Basic Life Support ambulances were in operation.

Previously as part of the budget process, FDNY officials testified at the NYC Council Fire and Emergency Management Committee hearing on March 15, 2024. Regarding the number of EMS personnel to operate ambulances, it was stated, "Right now, our headcount is adequate." It was an honest answer, considering that the average number of operational Advanced Life Support- and Basic Life Support ambulances has hovered daily around 82% of target for several years.

NYC government can't control all the external factors contributing to increasing EMS response times, such as hospital Emergency Room closures. But to save lives, it can buy ambulances. To attract and retain sufficient FDNY EMTs and paramedics, it can provide the wage and benefits parity, for which both the City Council and the Mayor have *voiced* support over many years.

Thank you for your attention to this matter. I would appreciate a reply.

Sincerely,

Helen Northmore

copy to file.

Enclosures: NYC "Daily Fleet Report" for September 16, 2024 and "It's Not Just Traffic."
Letter sent via email and USPS to all 51 Council Members at their City Hall and District Offices.

Source: Local Law 119 Compliance:
<https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page>

EXCERPTS

NYCAnalytics

Data as of Sep-30-2024

Showing Month

Month

Borough

Call Type

2024 / -- - 2024 / --

Multiple selections

All

Voice

SEGMENT

1

Clear All



LL119

Segments

Agency	Description	Percentage	# of Incidents
FDNY	Percentage of response time to structural and non-structural fires by fire units less than 5 minutes	42.3%	14,811
FDNY	Percentage of response time to structural and non-structural fires by fire units between 5 and 10 minutes	54.2%	14,811
FDNY	Percentage of response time to structural and non-structural fires by fire units between 10 and 20 minutes	2.9%	14,811
FDNY	Percentage of response time to structural and non-structural fires by fire units more than 20 minutes	0.5%	14,811

Agency	Description	Percentage	# of Incidents
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances between 10 and 20 minutes, in total and disaggregated by segment	42.1%	14,404
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances between 6 and 10 minutes, in total and disaggregated by segment	40.6%	14,404
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances less than 6 minutes, in total and disaggregated by segment	9.3%	14,404
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances more than 20 minutes, in total and disaggregated by segment	8.1%	14,404

Source: Mayor's Office of Operations, September 16, 2024
<https://www.nyc.gov/site/operations/performance/fleet-report.page>

NYC Fleet Daily Service Report

9/16/2024

NYC Fleet Daily Service Report: Agency Summary

Agency	Fleet Roster	Target daily in service	Actual IS
DCAS Managed	2,640	2,482	2,591
DEP	2,237	2,013	1,922
DOC	728	655	679
DOHMH	211	198	206
DOT	3,940	3,349	3,572
DSNY	6,164	4,808	4,661
FDNY	2,307	1,846	1,806
NYPD	8,965	8,069	8,110
Parks	2,912	2,621	2,668
Citywide	30,104	27,094	26,215

NYC Fleet Daily Service Report: Critical Fleets Summary

Agency	Critical fleet	Fleet roster	Target daily in service	Actual IS
DCAS	Mayoral fleet	23	22	22
DCAS	OEM	142	133	142
DCAS	Sheriff	126	118	126
DEP	Customer service	99	93	93
DEP	Environmental compliance	84	79	82
DEP	Police	134	126	119
DEP	Sewer and water	1,083	975	910
DOC	Buses	120	108	104
DOC	Sedans	83	75	81
DOC	Vans	145	131	134
DOT	Asphalt plant	46	39	44
DOT	HIQA	161	145	152
DOT	Material hauling	303	258	262
DOT	Meters	127	108	114
DOT	Paving	506	430	452
DSNY	Collection trucks	1,502	1,232	1,060
DSNY	Dual bin collection trucks	709	581	469
DSNY	Sweepers	438	337	307
FDNY	Ambulances	666	500	391
FDNY	Ladders	180	141	140
FDNY	Pumpers	224	197	176
NYPD	Traffic	496	446	454
Parks	Forestry	175	158	141
Parks	Packers	109	98	76
Total	-	7,681	6,530	6,051

Seasonal Fleets

DSNY	Salt spreaders	412	412	308
Parks	Beach	74	67	61

IT'S NOT JUST TRAFFIC.
Waiting MORE than 20 MINUTES
in NYC for the Arrival of Medics
in an Advanced Life Support (ALS)
Ambulance

In the first 8 months of **2024**, **18,832** NYC patients with life-threatening medical emergencies **waited more than 20 minutes for medics** in an ALS ambulance to arrive and provide pre-hospital emergency medical treatment.

- **11:03** minutes/seconds, from January through August 2024: This is the average city-wide response time by ambulance units to [Segment 1-3 calls](https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page) (life-threatening medical emergencies including cardiac arrest, difficulty breathing, unconsciousness, choking, obstetrical complication, major injury, seizure, etc.). For **12.7%** of those calls, it took **longer than 20 minutes** for an ALS ambulance to arrive. **Local Law 119 Compliance**, <https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page>
- **10:43** minutes/seconds in **2023**: That was the average city-wide response time by ambulance units to Segment 1-3 calls. For **11.4%** of those calls, it took **longer than 20 minutes** for an ALS ambulance to arrive = **26,573 patients in 2023**. **Local Law 119 Compliance**, <https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page>
- **9:20** minutes/seconds in **2014**: That was the average city-wide response time by ambulance units to Segment 1-3 calls. For **5.0%** of those calls, it took **longer than 20 minutes** for an ALS ambulance to arrive = **11,920 patients in 2014**. **Local Law 119 Compliance**, <https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page>

Survival for patients with an initially shockable (heart) rhythm **decreases 10% for every minute delay** in defibrillation. . . When epinephrine is administered early, (**<5-10 min**) **after arrest onset**, it improves neurologically intact survival." " *Journal of Emergency Medical Services*: <https://www.jems.com/patient-care/improving-survival-from-cardiac-arrest-is-all-about-cheating-time/>

Time is Brain Quantified - "In patients experiencing a typical large vessel acute ischemic stroke. . . **in each minute, 1.9 million neurons, 14 billion synapses, and 12 km (7.5 miles) of myelinated fibers are destroyed.**" American Heart Association Journals. <https://www.ahajournals.org/doi/full/10.1161/01.str.0000196957.55928.ab>

THE REASONS FOR INCREASED EMS RESPONSE TIMES ARE WELL KNOWN:

Preliminary Mayor's Management Report 2024: "Increased response times may be attributed to higher levels of traffic, an increase in the overall incidence of life-threatening medical emergencies, a decrease in the number of ambulances in service per day, and an increase in ambulance emergency room turnover time." Adams, Eric, Mayor, page 53.

<https://www.nyc.gov/assets/operations/downloads/pdf/pmmr2024/fdny.pdf>

• REASON #1 - MORE LIFE-THREATENING MEDICAL EMERGENCIES

Mayor's Management Report, September 2023: "In Fiscal 2023 . . . Dispatch and travel time **by ambulances to life-threatening medical emergencies increased 33 seconds**. These increases in dispatch and travel time can be attributed to **a seven percent increase in life-threatening medical emergency incidents**." Adams, Eric, Mayor, page 69.

https://www.nyc.gov/assets/operations/downloads/pdf/mmr2023/2023_mmr.pdf

* * *

Mayor's Management Report, September 16, 2024: Between Fiscal 2023 and Fiscal 2024, "(T)he overall incidence of medical emergencies increased including **a five percent increase in life-threatening incidents**. . . The average response from ambulances to life threatening medical emergencies (dispatch and travel) **increased by 17 seconds** over the past fiscal year." Adams, Eric, Mayor, page 69. <https://www.nyc.gov/assets/operations/downloads/pdf/mmr2024/fdny.pdf>

• REASON #2 - SHORTAGE OF AMBULANCES for Increased Workload

NYC City Council, **March 15, 2024:** JoAnn Ariola, Chair, Committee on Fire and Emergency Management, "So, according to data provided by the FDNY to Council **in December of 2023, 40 percent of the City's ambulances were out of service**, meaning that nearly 300 ambulances were not available to provide New Yorkers with vital emergency care." *Hearing Transcript*, March 15, 2024.

<https://legistar.council.nyc.gov/LegislationDetail.aspx?ID=6548591&GUID=C70DD3FF-A02B-438F-8D5E-7059292BDB5B>

* * *

Mayor's Management Report, September 2023: ". . . [the increased response time] is best described by the **increase in workload**, and the peak number of ambulances in service per day . . . older ambulances were decommissioned in Fiscal 2023, thereby **reducing the peak number of ambulances** available for use. With **fewer ambulances** available in Fiscal 2023, FDNY was able to schedule fewer single-tour 12-hour units . . . as compared to prior fiscal years." Adams, Eric, Mayor, page 69. https://www.nyc.gov/assets/operations/downloads/pdf/mmr2023/2023_mmr.pdf.

* * *

Mayor's Management Report, September 16, 2024: "Additionally, **total medical emergency incidents increased two percent to 1,644,446 in Fiscal 2024**. The ability of ambulances to keep up with increasing demand has been strained and the **average ambulance in service hours has remained about the same over the past two fiscal years**." Adams, Eric, Mayor, page 69.

<https://www.nyc.gov/assets/operations/downloads/pdf/mmr2024/fdny.pdf>

On September 16, 2024, the day that NYC released the FY 2024 Mayor's Management Report, 391 ambulances, or only 78% of the FDNY target number of 500 ambulances, were in operation.

The "NYC Fleet Daily Service Report" is posted daily by New York City Mayor's Office of Operations: <https://www.nyc.gov/site/operations/performance/fleet-report.page>

• **REASON #3 - GREATER DISTANCES TO and DELAYS at EMERGENCY ROOMS**

"Over the last 20 years, New York State has closed 41 hospitals with **18 of them located in New York City**. . . (then acting FDNY Commissioner) Kavanagh says that massive contraction puts much greater strain on FDNY EMS members. . . it's something we see in EMS when hospitals close there are fewer places for EMS to go Kavanagh said. "We have to go further and wait longer and so that means **the turnaround time for an individual crew is that much longer**." Hennelly, Bob, "Acting FDNY Commissioner Laura Kavanagh Calls EMS the 'Only Resource' for Many During the Pandemic", *Labor Press*, June 16, 2022. <https://www.laborpress.org/acting-fdny-commissioner-laura-kavanagh-calls-ems-the-only-resource-for-many-during-the-pandemic-%EF%BF%BC/>

* * *

NYC Council April 1, **2024**: "The impending **closure of Mount Sinai Beth Israel's Emergency Department** . . . will undoubtedly strain the resources of Bellevue Hospital, intensifying the pressure . . ." *New York City Council 's Response to the Fiscal 2025 Preliminary Budget and fiscal 2024 Preliminary Mayor's Management Report*", April 1, 2024. page 29. <https://council.nyc.gov/wp-content/uploads/2024/04/FY25-Prelim-Budget-Response.pdf>

* * *

NYS Department of Health: **In 2022, 104,363 EMS patients** in NYC, who were taken to the hospital, **waited 31 minutes or longer for emergency room staff to assume their care** from EMS medical personnel. Source: NYS DOH, Bureau of Emergency Medical Services and Trauma Systems, "Ambulance Offload 2019-2022 Data, Patient turnaround time EMS 911 Trends New York City 2019-2022". https://www.health.ny.gov/facilities/public_health_and_health_planning_council/meetings/2023-02-08/docs/ambulance_offload.pdf

* * *

Mayor's Management Report, September 16, 2024: "Average turnaround time for ambulances at hospitals also steadily **increased by over two minutes** over the past fiscal year." (FY2024) Adams, Eric, Mayor, page 69. <https://www.nyc.gov/assets/operations/downloads/pdf/mmr2024/fdny.pdf>

* * *

When hospital Emergency Rooms get too busy, ambulances may be diverted to other hospitals, at greater distances. *FDNY Emergency Department Ambulance Diversion/Redirection Policy*, Revised May 2, 2019, https://www.gnyha.org/wp-content/uploads/2021/04/EMS-OGP-115_01-Emergency-Department-Ambulance-Diversion.pdf

• **REASON #4 - CHRONIC SHORTAGE of EMTs and PARAMEDICS**

New York State Senate, October 17, 2023, Oren Barzilay, President FDNY EMS Local 2507, DC 37, AFSCME, AFL-CIO: "There is no denying that New York is facing large labor shortages . . . especially among FDNY EMS personnel.

"Any EMT or paramedic will tell you that these shortages are the result of decades of pay disparity. EMS members are paid about 40% to 50% less than New York's other great first responder agencies.

"Poverty wages and truly difficult, if not horrific, work conditions for members result in EMS losing on average 30% of new hires within 3 years; and 50% in 5 years! That is a massive attrition rate. . ."
Standing Committee on Civil Service and Pensions NYC Public Hearing.

<https://www.nysenate.gov/sites/default/files/admin/structure/media/manage/filefile/a/2023-10/local-2507.pdf>

* * *

NYC Council Fire and Emergency Management Committee Hearing, January 28, 2020. Hearing Transcript 12820.pdf <https://legistar.council.nyc.gov/LegislationDetail.aspx?ID=4146331&GUID=6E165905-EC68-4D4B-9B08-BE4D480E42C2&Options=&Search=>

Joseph Borelli, Chair: "The time has come for this administration to be consistent with its progressive values and provide equal pay for EMS."

Justin Brannan: ". . . where there's a will there's a way, we got to get it... we have to get it done."

Anthony Almojera, Vice-President, EMS Officers Union: "For the past two decades we have been coming here explaining the trials and tribulations of New York City's EMS system, the common thread in all those meetings have been retention and salary. . . In the last four years alone as of 2019, a full 68 percent of our workforce has left for other jobs."

José Prosper, President FDNY Hispanic Society: "I started in this department as an EMS first responder, I love my work saving lives and providing medical services to New Yorkers, but I couldn't stay because I couldn't make ends meet working in EMS. . . I went to the fire side of the department. When I started on the fire side even though I had no experience firefighting I was given an almost 30 percent bump in pay . . . It is very discouraging to realize that 22 years later the problem . . . has not been taken serious by the city. . ."

Michael Greco, Vice-President Uniformed EMTs, Paramedics & Fire Inspectors FDNY: "Every four years we lose 25 percent of our members to the fire side through a botched process which the department then adds insult to injury by referring to this as a promotion that means one in four of our members are gone every single year."

David Lin, President of the FDNY Phoenix Society: " I'm here on behalf of my organization to support pay equality for EMS members for our department."

Kathleen Knuth, President FDNY Women's Benevolent Association: "We are one department, we're fire and EMS, first responders work together shoulder to shoulder to protect the lives of New Yorkers. All of our work is equally important and challenging and our colleagues providing emergency medical services should be paid fairly and be compensated for the risks they take every day."

via USPS & email

████████████████████
Staten Island, New York 10301-3013
February 21, 2025

Re: **March 14, 2025 NYC Council Fire and Emergency Management Committee Public Hearing**

JoAnn Ariola, Committee Chair, NYC Council Fire and Emergency Management Committee and Committee Members: Carmen De La Rosa, Kevin C. Riley, Oswald Feliz, James F. Gennaro, Lynn Schulman, and Susan Zhuang,

In 2024, the FDNY responded to 2,158 serious fires and emergencies, while the Emergency Medical Services responded to the vast majority of FDNY 911 calls. Just for segment 1-3 calls for life-threatening emergencies such as cardiac arrest and choking, EMS answered 627,599 calls. However, last year in the FY 2025 FDNY Preliminary Budget Plan, EMS was allocated only 16.2% of the FDNY budget. Regrettably last month, **in January 2025, the response time by either Fire or EMS to the majority of all segment 1 calls was 10 minutes or more.** Will you ensure the FDNY EMS is funded to have sufficient staff, equipment, and vehicles to handle the increased number of 911 calls **for life-threatening emergencies?**

FDNY Emergency Medical Services response times to New Yorkers' 911 calls for emergency medical conditions remain overly long. In 2023, 80% of patients who suffered cardiac arrest, died. With insufficient numbers of Emergency Medical Technicians and paramedics, fewer ambulances can be, and are, in daily service. Meanwhile, NYC can bill such 911 patients and their health insurance providers upwards of \$1,600 for emergency medical treatment and ambulance transport, thereby yearly reimbursing millions of dollars to NYC. How is this income used for the FDNY EMS?

The FDNY Emergency Medical Services (EMS) have been working without a contract since 2022. Low pay is a major obstacle to the recruitment and retention of FDNY EMS staff. The city has never obeyed a 2001 law stipulating that, in contract talks, it treat the FDNY EMS like the other NYC "uniformed services": Sanitation, Corrections, Police, and Fire. Consequently, EMS pay has so deteriorated that after 5½ years on the job, an EMT's base salary is \$59,534, while a sanitation worker's is \$88,979, a firefighter's is \$105,146 and a police officer's is \$109,352.

The hugely disproportionate low EMS "first responder" pay is a barrier to recruitment, training and retention of experienced staff, and so to saving more lives. How will you ensure that more New Yorkers' lives are saved?

Your fellow New Yorker,

Helen Northmore

On page 2: Questions for the FDNY for the March 14th NYC Council Fire & EM Committee hearing.

Copy to: Council Speaker Adams, Council Member Brannan and Council Member Brewer, and file.

Attached: 1. According to a NYC H&HC audit, \$452,145,000 is due NYC for FDNY EMS services in FY2024. "Basic Financial Statements and Supplemental Schedules", 6/30/24, p. 40.
<https://www.abo.ny.gov/annualreports/PARISAuditReports/FYE2024/Local/NewYorkCityHealthandHospitalsCorporation2024.pdf>
2. Just five examples of the many days in 2025 of the unreached target number for FDNY EMS ambulances in service, from: <https://www.nyc.gov/site/operations/performance/fleet-report.page>
3. January 2025 EMS & Fire 911 response times to Level 1 calls for each NYC borough from: "Local Law 119 Compliance" <https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page>

HN:bms

page 1 of 2

- Every year the FDNY reports the number of deaths in NYC from fires. In January of this year, the average response time to all fires was under 7 minutes. In the same month, the majority of patients, who suffered life-threatening medical emergencies, waited 10 minutes or more for either **FDNY Fire or Emergency Medical Services (EMS)** to arrive. Has the FDNY counted the number of deaths each year that can be attributed to overly long response times to 911 calls for life-threatening medical emergencies?
<https://www.nyc.gov/site/911reporting/reports/local-law-119-compliance.page>
- 911 calls for emergency medical help have increased. How many more daily FDNY EMS Basic Life Support (BLS) ambulance runs and how many more Advanced Life Support (ALS) ambulance runs were scheduled in 2024 than in 2023, are in 2025 than in 2024?
- On the Daily Fleet Report, the number of "in service" FDNY pumper and ladder vehicles hovers near or above 90%. The daily number of FDNY EMS ambulances frequently falls below 80%. Since BLS and ALS ambulances are staffed with differently certified personnel, either EMTs or paramedics, why aren't the 2 different types of EMS vehicles reported separately on the Fleet Report in the same way that Fire pumper and ladder vehicles are?
- How many certified Emergency Medical Technicians (EMTs) were employed by the FDNY EMS on December 31, 2023? How many certified EMTs were employed by the FDNY EMS on December 31, 2024? How many certified paramedics (not officers) were employed by the FDNY EMS on December 31, 2023? How many certified paramedics (not officers) were employed by the FDNY EMS on December 31, 2024?
- What is the exact number of FDNY EMTs and the exact number of FDNY EMS paramedics who departed the FDNY EMS altogether in the 2024 calendar year: through transfers to other FDNY bureaus including fire; through transfers to other city agencies, other than FDNY; through resignation from city employment altogether; and through retirement from city employment.
- What is the exact number of current FDNY EMTs, paramedics and officers who are eligible to transfer from the FDNY EMS to the FDNY Fire Bureau via the firefighter "promotion" (transfer) list? How many EMS staff does the FDNY plan to "promote" (transfer) via this list from FDNY EMS to Fire in 2025, 2026, and in 2027?
- How many FNDY EMS classes were held to train new EMTs in the 2024 calendar year? What was the target number of students for each class? How many were in each class? How many EMTs were actually graduated from each class in calendar year 2024? How many classes are scheduled for new EMTs in calendar year 2025? What is each's capacity?
- In calendar year 2024, how many new FDNY EMS paramedics were trained and appointed? How many FDNY EMS classes are scheduled to train new paramedics in the 2025 calendar year? What is the capacity of each?
- For each day in January 2025, separately enumerate how many BLS and ALS ambulance runs were cancelled because of lack of staff. How many of each ran for less than a full shift?
- A NYC H&HC June 30, 2024 audit noted that a balance of \$452,145,000 in third-party payor reimbursement was due NYC for services provided by FDNY Emergency Medical Services (EMS). That's tens of millions of dollars more than the \$427,052, 000 budgeted for its cost in the *FY 2024 FDNY Preliminary Plan*. <https://council.nyc.gov/budget/wp-content/uploads/sites/54/2024/03/057-FDNY.pdf>
There was a record high of 1,630,446 EMS responses to 911calls in 2024; how much money is the FDNY Emergency Medical Services projected to earn from them for NYC in FY2025?

Fleet Availability for Thursday, January 2, 2025

The report format is as follows:

- **Fleet Roster:** the total size of each fleet.
- **Target Daily in Service:** the number of vehicles that the agency would like to see available – i.e., not down for repair – on any given day.
- **Actual in Service:** the number available today. A cell is shaded:
 - Green and marked with a green plus sign if the target has been met,
 - Yellow and marked with a brown less-than sign if availability is within 10% of the target, or
 - Red and marked with a red minus sign if availability is more than 10% below target.
- **Average Over FY 18 to Date:** the average daily availability for the fiscal year, which runs from July 1st to June 30th, to date.

[Download the report](#)

NYC Fleet Daily Service Report: Critical Fleets Summary

Agency	Critical Fleet	Fleet Roster	Target Daily in Service	Actual in Service	Average Over FY 22 to Date
DCAS	Mayoral fleet	22	21	21 +	22
DCAS	OEM	141	133	141 +	150
DCAS	Sheriff	131	123	126 +	125
DEP	Customer service	99	93	93 +	86
DEP	Environmental compliance	83	78	82 +	92
DEP	Police	133	125	123 <	119
DEP	Sewer and water	1133	1020	971 <	923
DOC	Buses	120	108	104 <	104
DOC	Sedans	83	75	80 +	81
DOC	Vans	150	135	140 +	128
DOT	Asphalt plant	46	39	37 <	36
DOT	HIQA	169	152	156 +	144
DOT	Material hauling	298	253	251 <	246
DOT	Meters	128	109	120 +	123
DOT	Paving	510	434	432 <	391
DSNY	Collection trucks	1506	1235	1070 -	1148
DSNY	Dual bin collection trucks	711	583	522 -	324
DSNY	Sweepers	455	350	301 -	270
FDNY	Ambulances	664	498	354 -	409
FDNY	Ladders	181	142	130 <	140
FDNY	Pumpers	223	196	174 -	179
NYPD	Traffic	519	467	467 +	460

Fleet Availability for Monday, January 6, 2025

The report format is as follows:

- **Fleet Roster:** the total size of each fleet.
- **Target Daily in Service:** the number of vehicles that the agency would like to see available – i.e., not down for repair – on any given day.
- **Actual in Service:** the number available today. A cell is shaded:
 - Green and marked with a green plus sign if the target has been met,
 - Yellow and marked with a brown less-than sign if availability is within 10% of the target, or
 - Red and marked with a red minus sign if availability is more than 10% below target.
- **Average Over FY 18 to Date:** the average daily availability for the fiscal year, which runs from July 1st to June 30th, to date.

NYC Fleet Daily Service Report: Critical Fleets Summary

Agency	Critical Fleet	Fleet Roster	Target Daily in Service	Actual in Service	Average Over FY 22 to Date
DCAS	Mayoral fleet	22	21	21 +	22
DCAS	OEM	141	133	141 +	150
DCAS	Sheriff	131	123	126 +	125
DEP	Customer service	99	93	94 +	86
DEP	Environmental compliance	83	78	82 +	92
DEP	Police	133	125	119 <	119
DEP	Sewer and water	1123	1011	960 <	923
DOC	Buses	120	108	106 <	104
DOC	Sedans	83	75	79 +	81
DOC	Vans	150	135	142 +	128
DOT	Asphalt plant	46	39	40 +	36
DOT	HIQA	169	152	155 +	144
DOT	Material hauling	298	253	261 +	246
DOT	Meters	128	109	120 +	123
DOT	Paving	510	434	429 <	391
DSNY	Collection trucks	1508	1237	1079 -	1148
DSNY	Dual bin collection trucks	711	583	513 -	324
DSNY	Sweepers	453	349	320 <	270
FDNY	Ambulances	660	495	349 -	409
FDNY	Ladders	182	143	140 <	140
FDNY	Pumpers	223	196	181 <	179

Fleet Availability for Monday, January 13, 2025

The report format is as follows:

- **Fleet Roster:** the total size of each fleet.
- **Target Daily in Service:** the number of vehicles that the agency would like to see available – i.e., not down for repair – on any given day.
- **Actual in Service:** the number available today. A cell is shaded:
 - Green and marked with a green plus sign if the target has been met,
 - Yellow and marked with a brown less-than sign if availability is within 10% of the target, or
 - Red and marked with a red minus sign if availability is more than 10% below target.
- **Average Over FY 18 to Date:** the average daily availability for the fiscal year, which runs from July 1st to June 30th, to date.

NYC Fleet Daily Service Report: Critical Fleets Summary






















Agency	Critical Fleet	Fleet Roster	Target Daily in Service	Actual in Service	Average Over FY 22 to Date
DCAS	Mayoral fleet	22	21	21 +	22
DCAS	OEM	141	133	141 +	150
DCAS	Sheriff	131	123	126 +	125
DEP	Customer service	99	93	95 +	86
DEP	Environmental compliance	83	78	81 +	92
DEP	Police	133	125	119 <	119
DEP	Sewer and water	1123	1011	951 <	923
DOC	Buses	120	108	106 <	104
DOC	Sedans	83	75	78 +	81
DOC	Vans	150	135	140 +	128
DOT	Asphalt plant	46	39	41 +	36
DOT	HIQA	170	153	153 +	144
DOT	Material hauling	298	253	257 +	246
DOT	Meters	129	110	123 +	123
DOT	Paving	509	433	421 <	391
DSNY	Collection trucks	1511	1239	1086 -	1148
DSNY	Dual bin collection trucks	710	582	514 -	324
DSNY	Sweepers	449	346	338 <	270
FDNY	Ambulances	662	497	362 -	409
FDNY	Ladders	182	143	134 <	140
FDNY	Pumpers	223	196	179 <	179

Fleet Availability for Wednesday, January 22, 2025

The report format is as follows:

- **Fleet Roster:** the total size of each fleet.
- **Target Daily in Service:** the number of vehicles that the agency would like to see available – i.e., not down for repair – on any given day.
- **Actual in Service:** the number available today. A cell is shaded:
 - Green and marked with a green plus sign if the target has been met,
 - Yellow and marked with a brown less-than sign if availability is within 10% of the target, or
 - Red and marked with a red minus sign if availability is more than 10% below target.
- **Average Over FY 18 to Date:** the average daily availability for the fiscal year, which runs from July 1st to June 30th, to date.

NYC Fleet Daily Service Report: Critical Fleets Summary






















Agency	Critical Fleet	Fleet Roster	Target Daily in Service	Actual in Service	Average Over FY 22 to Date
DCAS	Mayoral fleet	22	21	21 	387
DCAS	OEM	141	133	141 	21
DCAS	Sheriff	131	123	126 	142
DEP	Customer service	99	93	95 	125
DEP	Environmental compliance	83	78	80 	92
DEP	Police	133	125	116 	81
DEP	Sewer and water	1123	1011	947 	120
DOC	Buses	120	108	98 	922
DOC	Sedans	72	65	70 	101
DOC	Vans	150	135	139 	80
DOT	Asphalt plant	46	39	41 	136
DOT	HIQA	168	151	147 	41
DOT	Material hauling	298	253	252 	150
DOT	Meters	129	110	121 	253
DOT	Paving	509	433	416 	118
DSNY	Collection trucks	1510	1238	1073 	434
DSNY	Dual bin collection trucks	710	582	506 	1094
DSNY	Sweepers	454	350	365 	434
FDNY	Ambulances	660	495	387 	294
FDNY	Ladders	182	143	139 	403
FDNY	Pumpers	223	196	178 	134

Fleet Availability for Tuesday, February 18, 2025

The report format is as follows:

- **Fleet Roster:** the total size of each fleet.
- **Target Daily in Service:** the number of vehicles that the agency would like to see available – i.e., not down for repair – on any given day.
- **Actual in Service:** the number available today. A cell is shaded:
 - Green and marked with a green plus sign if the target has been met,
 - Yellow and marked with a brown less-than sign if availability is within 10% of the target, or
 - Red and marked with a red minus sign if availability is more than 10% below target.
- **Average Over FY 18 to Date:** the average daily availability for the fiscal year, which runs from July 1st to June 30th, to date.

NYC Fleet Daily Service Report: Critical Fleets Summary

Agency	Critical Fleet	Fleet Roster	Target Daily in Service	Actual in Service	Average Over FY 22 to Date
DCAS	Mayoral fleet	22	21	21 	21
DCAS	OEM	142	133	142 	142
DCAS	Sheriff	118	111	113 	124
DEP	Customer service	102	96	97 	92
DEP	Environmental compliance	83	78	78 	81
DEP	Police	133	125	111 	119
DEP	Sewer and water	1143	1029	971 	927
DOC	Buses	120	108	100 	101
DOC	Sedans	72	65	69 	79
DOC	Vans	150	135	137 	136
DOT	Asphalt plant	46	39	39 	40
DOT	HIQA	168	151	149 	150
DOT	Material hauling	296	252	254 	252
DOT	Meters	130	111	121 	118
DOT	Paving	509	433	429 	433
DSNY	Collection trucks	1505	1234	1121 	1092
DSNY	Dual bin collection trucks	710	582	536 	444
DSNY	Sweepers	451	347	366 	302
FDNY	Ambulances	657	493	395 	402
FDNY	Ladders	182	143	133 	135
FDNY	Pumpers	223	196	180 	177



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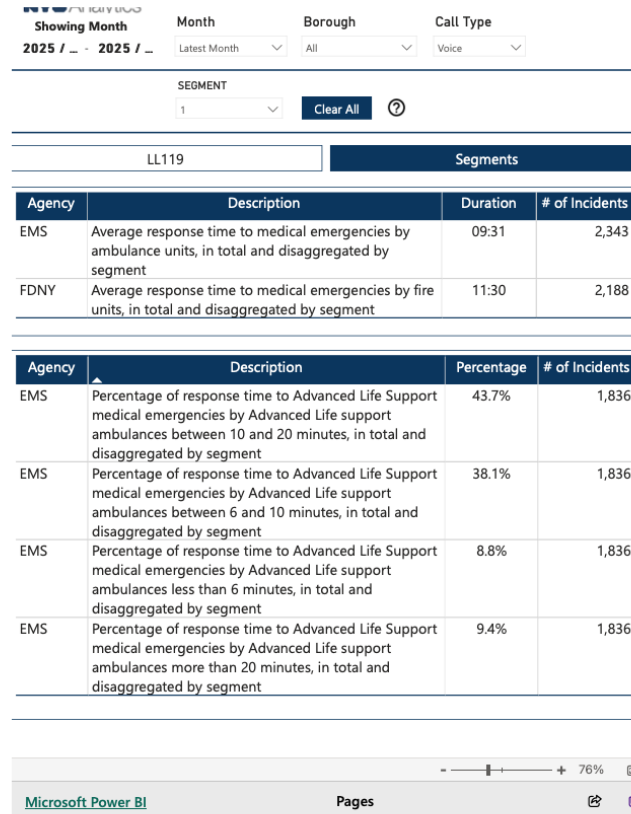
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Call Type
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Latest Month
Bronx
Voice

Data as of Feb-10-2_

SEGMENT
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Segments

Agency	Description	Duration	# of Incidents
EMS	Average response time to medical emergencies by ambulance units, in total and disaggregated by segment	10:56	461
FDNY	Average response time to medical emergencies by fire units, in total and disaggregated by segment	13:46	437

Agency	Description	Percentage	# of Incidents
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances between 10 and 20 minutes, in total and disaggregated by segment	56.4%	227
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances between 6 and 10 minutes, in total and disaggregated by segment	22.0%	227
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances less than 6 minutes, in total and disaggregated by segment	4.8%	227
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances more than 20 minutes, in total and disaggregated by segment	16.7%	227

- 76%

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Showing Month	Month	Borough	Call Type
2025 / ... - 2025 / ...	Latest Month ▼	Multiple selections ▲ <input type="checkbox"/> Select all <input type="checkbox"/> Bronx <input checked="" type="checkbox"/> Brooklyn <input type="checkbox"/> Manhattan <input type="checkbox"/> Queens <input type="checkbox"/> Staten Island <input type="checkbox"/> Unspecified	Voice ▼
SEGMENT			
1 ▼			
LL119			
Segments			
Agency	Description	Duration	# of Incidents
EMS	Average response time to medical emergencies by ambulance units, in total and disaggregated by segment	09:14	703
FDNY	Average response time to medical emergencies by fire units, in total and disaggregated by segment	11:22	660

Agency	Description	Percentage	# of Incidents
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances between 10 and 20 minutes, in total and disaggregated by segment	40.5%	612
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances between 6 and 10 minutes, in total and disaggregated by segment	40.2%	612
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances less than 6 minutes, in total and disaggregated by segment	10.1%	612
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances more than 20 minutes, in total and disaggregated by segment	9.2%	612

- 76%

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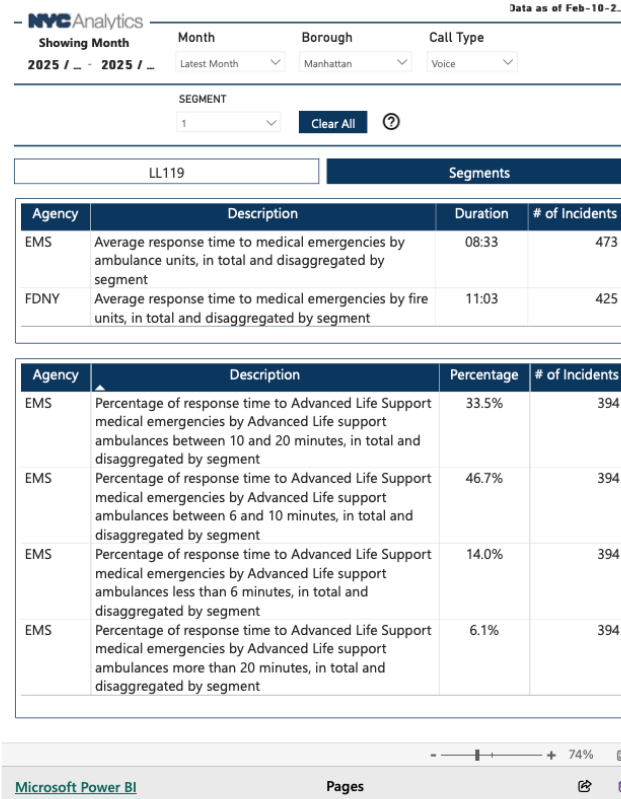
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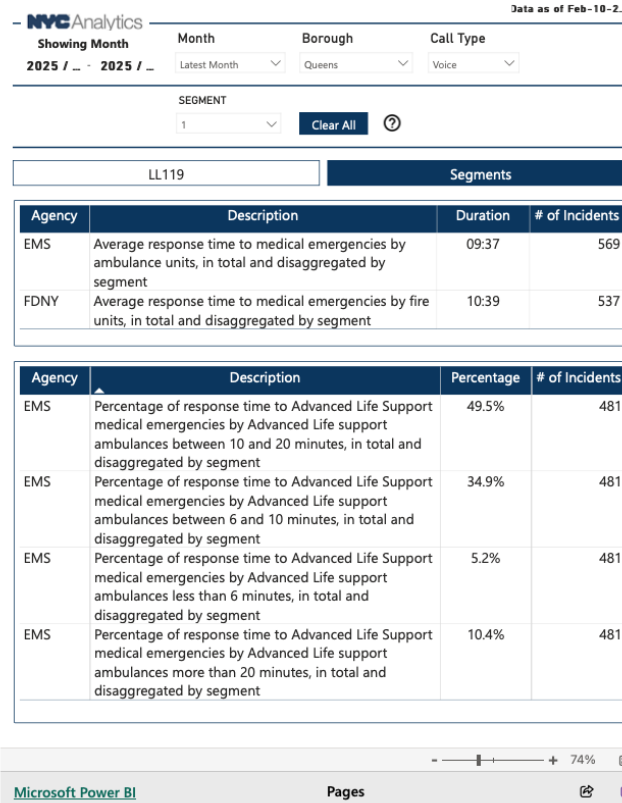



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Showing Month
Month
Borough
Call Type
2025 / - 2025 / -
Latest Month
Staten Island
Voice

Data as of Feb-10-2_

SEGMENT
1
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LL119
Segments

Agency	Description	Duration	# of Incidents
EMS	Average response time to medical emergencies by ambulance units, in total and disaggregated by segment	09:04	135
FDNY	Average response time to medical emergencies by fire units, in total and disaggregated by segment	09:29	128

Agency	Description	Percentage	# of Incidents
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances between 10 and 20 minutes, in total and disaggregated by segment	46.7%	120
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances between 6 and 10 minutes, in total and disaggregated by segment	42.5%	120
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances less than 6 minutes, in total and disaggregated by segment	7.5%	120
EMS	Percentage of response time to Advanced Life Support medical emergencies by Advanced Life support ambulances more than 20 minutes, in total and disaggregated by segment	3.3%	120

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Testimony to the NYC Committee on Fire and Emergency Management Regarding Illegal Parking by Zipcar and Car-Sharing Vehicles

March 14, 2025

Dear Chairperson and Esteemed Members of the Committee,

I am writing to bring to your attention an urgent public safety issue concerning the illegal parking of car-sharing vehicles, particularly those operated by Zipcar, in front of fire hydrants across New York City. These vehicles not only block emergency access but also highlight a broader failure in the city's placement of Zipcar locations—especially in highly vulnerable residential areas. **It is time for the City to take action by removing or relocating Zipcar parking spaces near apartment buildings where residents' lives could be put at risk.**

Personal Incident: A Zipcar Blocking Emergency Access

Last year, a Zipcar was parked illegally in front of the fire hydrant adjacent to my apartment building in Queens. **Had there been a fire, emergency responders would have lost critical minutes trying to secure a water source, putting residents at risk.** Despite reporting the violation, the problem persisted, raising serious concerns about the lack of oversight on car-sharing rentals and the irresponsibility of users.

Citywide Issue: Illegal Parking and Public Safety Risks

This was not an isolated incident. Across New York City, car-sharing vehicles are repeatedly found parked illegally by fire hydrants. Many renters, often unfamiliar with local parking laws or simply indifferent to them, leave Zipcars in dangerous locations, knowing enforcement is inconsistent at best. The consequences of such reckless behavior have already been seen—firefighters struggling to access hydrants, delayed emergency responses, and unnecessary risks for entire communities.

This is **not just about ticketing individual drivers**. This is about **poor transportation planning and lack of corporate responsibility**. Zipcar locations have been placed **far too close to highly vulnerable apartment buildings**, where dense populations increase the potential for tragedy in the event of a fire or other emergency.

Zipcar and the City Must Take Responsibility

Car-sharing companies like Zipcar profit from using public space but refuse to take responsibility for the dangers their vehicles create. They **do not educate renters adequately, do not enforce proper parking policies, and do not bear the consequences when their cars block emergency access**. It is unacceptable that **residents must live with the risk while Zipcar continues to operate unchecked**.

The Solution: Remove or Relocate Zipcar Parking Near Vulnerable Residential Buildings

I urge the Committee to take **immediate action** by:

1. **Removing or Relocating Zipcar Spaces Near High-Risk Residential Areas** – The city should **prohibit Zipcar from placing designated rental spots within one block of highly vulnerable**

apartment buildings where emergency access is critical.

2. **Mandating a Fire Hydrant Buffer Zone** – No Zipcar should be allowed to be parked within **500 feet of a fire hydrant, at any time, under any circumstances.**
3. **Holding Zipcar Accountable** – The city should fine Zipcar directly **every time one of their vehicles is found blocking a hydrant**, rather than just issuing tickets to individual renters.
4. **Stronger Enforcement on Illegal Parking by Car-Sharing Vehicles** – Traffic enforcement officers should **actively monitor known Zipcar locations** for violations, rather than waiting for 311 complaints.
5. **Requiring Zipcar to Implement Parking Education for Users** – Zipcar should be legally required to **display clear, unavoidable warnings about illegal parking** when users rent a vehicle.

Conclusion: Protect Residents, Not Car-Sharing Profits

New Yorkers should not have to **live in fear that a car-sharing vehicle will block a fire hydrant and cost lives.** The convenience of Zipcar **should never come before public safety.** It is time for the City to take **real action**—not just issue tickets, but **move these car-sharing locations out of harm's way.**

I strongly urge the Committee to take action on this issue before a tragedy occurs.

Thank you for your time and consideration.

Sincerely,
Kevin Ly

[REDACTED]

Forest Hills, NY 11375

March 14, 2025

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Robert Tucker

Address: Commissioner

I represent: NYC FDNY

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Mark Guerra

Address: First Deputy Commissioner

I represent: NYC FDNY

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____



(PLEASE PRINT)

Name: John Esposito

Address: Chief of Department

I represent: NYC FDNY

Address: _____

 Please complete this card and return to the Sergeant-at-Arms 

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Kevin Woods

Address: Chief of Fire Operations

I represent: NYC FDNY

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Michael Fields

Address: Chief of EMS

I represent: NYC FDNY

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Lizette Christoff

Address: Deputy Commissioner

I represent: NYC FDNY

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Nateesah Noonan

Address: Associate Commissioner

I represent: NYC FDNY

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 3.14.25

(PLEASE PRINT)

Name: MICHAEL J. NORTHMORE

Address: [REDACTED] STATEN ISLAND
NY 10301

I represent: MYSELF & HELEN NORTHMORE

Address: AS ABOVE

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 3/14/25

(PLEASE PRINT)

Name: Nancy Carbone

Address: _____

I represent: Friends of Firefighters

Address: [REDACTED] Bklyn, NY 11231

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Michael Tracey

Address: 125 Maiden Lane

I represent: UFOA

Address: 125 Maiden Lane

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 3/14/25

(PLEASE PRINT)

Name: Sakeena Trice

Address: _____

I represent: NXLPI

Address: 151 W-30th St., NY, NY 10001

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: 3/14/2025

(PLEASE PRINT)

Name: Sharon Brown

Address: [REDACTED]

I represent: Rose of Sharon Enterprises

Address: [REDACTED]

Bklyn NY 11238
Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Zach Iscol

Address: Commissioner

I represent: NYC Emergency Management

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Christina Lovell

Address: First Deputy Commissioner

I represent: NYC Emergency Management

Address: _____

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____

☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Christopher Bianco

Address: Chief Financial Officer

I represent: NYC Emergency Management

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____
☐ in favor ☐ in opposition

Date: _____

(PLEASE PRINT)

Name: Joe Gorman (in place of Nancy

Address: Carbone)

I represent: Friends of Firefighters

Address: _____

Please complete this card and return to the Sergeant-at-Arms

**THE COUNCIL
THE CITY OF NEW YORK**

Appearance Card

I intend to appear and speak on Int. No. _____ Res. No. _____
☐ in favor ☐ in opposition

Date: 3/13/25

(PLEASE PRINT)

Name: Christopher Leon Johnson

Address: _____

I represent: Self

Address: _____

Please complete this card and return to the Sergeant-at-Arms