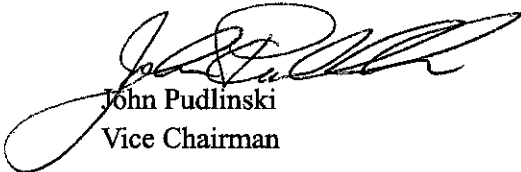


**MEETING MINUTES**  
**Special Organizational Meeting Agenda**  
**Interlocal Emergency Medical Services Committee**  
**Monday, September 22nd, 2025 ~ 6:00 p.m.**  
**In Person at Town Hall, 1st Selectman's Office, 74 West St. AND**  
**Remote Meeting by Live Internet Video Stream and Telephone**

1. **Call to Order by First Selectman** First Selectman Denise Raap called the hybrid meeting to order at 6:02 p.m. Litchfield members present in person were Jon Torrant, Dr. Maggie Noonan, John Pudlinski, Dan Morosani. Litchfield members present via Zoom were Ryan Litwin and Matt Dyer. Non-Litchfield IEMSC members Scott Pottbecker and Fred Rosa.
2. **Introduction of New Members**
3. **Reading of the Charge of the Committee by Chairman J. Pudlinski** read the resolution establishing an Interlocal Emergency Medical Services Committee, see attachment I.
4. **Election of Officers Motion:** J. Pudlinski nominated Dr. Noonan to be the Chair of the Interlocal Emergency Medical Services Committee. J. Torrant seconded the motion. J. Torrant moved to close nominations, J. Pudlinski seconded the motion. All members voted aye, and the motion for Dr. Noonan to be the Chair passed unanimously. **Motion:** D. Raap nominated J. Pudlinski to be the Vice Chair of the Interlocal Emergency Medical Services Committee. Dr. Noonan seconded the motion. J. Torrant moved to close nominations, D. Morosani seconded the motion. All members voted aye, and the motion for J. Pudlinski to be the Vice Chair passed unanimously.
5. **Secure Recording Secretary Motion:** J. Torrant nominated himself to be Secretary, D. Morosani seconded the motion. All members voted aye, and the motion passed.
6. **Discussion of Charge to Establish Goals** J. Pudlinski emphasized the urgent need to develop and sustain a reliable emergency medical services (EMS) program, citing a nationwide decline in volunteerism. He noted that staffing services are financially out of reach for Litchfield Volunteer Ambulance and historically ineffective, referencing their use in the 1990s and 2000s when coverage was inadequate. Dr. Noonan echoed these concerns, pointing out that staffing services often suffer from high turnover, inconsistent care quality, and overall unreliability. R. Litwin added that factors beyond socioeconomic issues, such as medicatal control, continuing education requirements, billing complexities, and paper run forms, also contribute to low volunteer rates. J. Pudlinski explained that the Town currently faces a supply-and-demand imbalance, with high EMS needs but too few volunteers. Dr. Noonan commended Bantam Volunteer Fire & EMS and LVA for their efforts in securing volunteers despite national shortages, though she cautioned that this model is not sustainable. J. Pudlinski identified living wages and medical benefits as the two primary drivers for long-term viability. D. Morosani observed that the EMT workforce is largely composed of individuals in their late teens to early twenties and those nearing retirement, attributing this to the challenge of making EMS a sustainable career. He noted that younger EMTs often transition into roles such as nurses, physician assistants, or doctors, while older EMTs eventually retire, resulting in a net

personnel loss. D. Morosani concluded by stating that the Town must remain competitive in the current labor market to attract and retain EMS professionals. S. Pottbecker noted that individuals who are no longer covered under their parents' medical insurance often seek alternative sources for coverage, which contributes to the loss of EMTs. He emphasized that offering medical insurance could serve as a valuable retention tool. D. Morosani also emphasized the importance of fully understanding the profit and loss implications if the Town were to pursue a model of full municipal ownership for EMS services. J. Pudlinski stated that the LVA has a 96% collection rate; however, reimbursement rates remain low, with Medicare paying \$480 and Medicaid paying \$350 for a \$1,000 bill. Dr. Noonan summarized the discussion by noting that there are paid EMS programs in the United States that could serve as case studies. She suggested examining how these programs were implemented, the challenges they faced, the regulatory hurdles they navigated, and whether their approaches could be adapted to Litchfield's needs and using these examples for guidance. Additionally, she proposed evaluating the volunteer groups current staffing model to determine what the actual staffing needs would be and estimating the associated costs. Dr. Noonan also raised the question of which structural models the Town might consider, whether full municipal ownership, a shared investment approach, or other viable options. Dr. Noonan highlighted the importance of community involvement and education, emphasizing that gaining public support for investment in EMS depends on keeping residents informed and engaged.

7. **Future Meeting Schedule Motion:** J. Tarrant motioned that the Interlocal Emergency Medical Services Committee meets the fourth Monday of every month at 6 p.m. for the maximum of one hour. R. Litwin seconded the motion, all voted aye and the motion passed.
8. **Adjournment Motion:** J. Pudlinski motioned to adjourn the meeting at 7:09 p.m. J. Tarrant seconded the motion, all voted aye and the motion passed.



John Pudlinski  
Vice Chairman

## Attachment I

### TOWN OF LITCHFIELD

BOARD OF SELECTMEN

July 15, 2025

#### **RESOLUTION ESTABLISHING AN INTERLOCAL EMERGENCY MEDICAL SERVICES COMMITTEE**

**SECTION 1. ESTABLISHMENT:** The Board of Selectmen of the Town of Litchfield, acting pursuant to Connecticut General Statutes, Section 19a-177, 19a-178a and 19a-183, hereby establishes an Interlocal Emergency Medical Services Committee.

**SECTION 2. MEMBERSHIP:** The Committee shall be composed of five (5) regular members and two (2) alternate members who shall be electors of the Town of Litchfield and appointed by the Board of Selectmen. As an Interlocal Committee, two (2) of the members shall be electors of the Town of Morris.

**SECTION 3. APPOINTMENTS, TERM AND VACANCIES:** The Board of Selectmen shall appoint the initial members and alternate members upon the adoption of this resolution to serve for a term of two (2) years. Vacancies shall be filled by the Board of Selectmen for the remainder of the term. An alternate member shall be designated to act in the absence of a member. Unexcused absence from three (3) consecutive meetings shall constitute a resignation, and upon declaring the position vacant the Board of Selectmen may appoint a replacement member or appoint an alternate member to fill the vacancy and then appoint a new alternate.

**SECTION 4. MISSION:** To develop and ensure a sustainable emergency medical services program which will provide the highest quality of medical care for the Primary Service Area (PSA) of the Litchfield Ambulance Association, Inc. (the Bantam Fire District and mutual aid to Litchfield Ambulance Association, Inc.)

The Committee shall be proactive in reviewing, improving, and/or developing of a system which will include, but not be limited to the procurement and retention of personnel, financing strategies, medical control and level of care, and oversight.

The Committee shall address the following components—operations, financing, and medical.

**SECTION 5: OBJECTIVES** In order to achieve the objectives set forth in the Mission Statement, the following areas of concern must be addressed:

1. Education of the governmental and public sectors as to the purposes and value of a sustainable Emergency Medical Services System. Education shall include but not be limited to historical information concerning EMS evolution and current instability, and analytical data.
2. Financing of an Emergency Medical Services System
3. Emergency Medical Services workforce including but not limited to personnel insufficiency and diminished recruitment and retention abilities
4. Pay scales and benefits
5. Emergency Medical Services clinical care
6. Contrasting and comparing public expectancies with available resources

Barring governmental and public understanding concerning the value of Emergency Medical Services, the ultimate collapse of the system is inevitable.

**SECTION 6: APPLICABLE LAWS:** The Committee shall be subject to the provisions of the Freedom of Information Act, Connecticut General Statutes Section 1-200, *et seq.*

Adopted at 7/15/2025 BOS Meeting