



# INTERNATIONAL ASSOCIATION OF FIRE CHIEFS

*Providing leadership for the fire and emergency services since 1873*

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April 14, 2011

The Honorable Alexander Garza, MD, MPH, Chair  
Assistant Secretary of Health Affairs and Chief Medical Officer  
Federal Interagency Committee on EMS (FICEMS)  
c/o Office of Emergency Medical Services  
1200 New Jersey Avenue, SE  
NTI-140  
Washington, DC 20590

**RE: Lead Federal Agency for EMS in the United States**

Dear Assistant Secretary Garza,

Thank you for identifying the International Association of Fire Chiefs (IAFC) as a stakeholder group and seeking our input on the concept of one federal lead agency for emergency medical services (EMS) in the United States. As the Federal Interagency Committee on EMS prepares an options paper for the White House, we hope that our comments are helpful and provide some clarity on this complex issue.

As you know, the IAFC represents the leadership of over 1.2 million firefighters and emergency responders. IAFC members are the world's leading experts in firefighting, emergency medical services, terrorism response, natural disasters, hazardous material spills, search and rescue, and public safety policy. To utilize our members' professional expertise and provide opportunities to thoroughly discuss important issues, the IAFC has eight special interest sections. In crafting our response, we solicited the expertise of our EMS Section, which addresses fire service-based EMS issues.

Our EMS Section has prepared a comprehensive examination of one federal lead agency for EMS by discussing the role of the federal government and what a lead federal agency for EMS should do. Our view is that the Department of Homeland Security (DHS) would be the appropriate home for a lead federal agency for EMS. DHS has a duty both to reduce the loss of life and property and protect the nation. As the attached document articulates in more detail, we strongly believe that pre-hospital emergency medical service response is primarily a public safety function focused on service to the community and the nation, not profit.

Once again, thank you for requesting our views on this important topic. We truly appreciate the leadership FICEMS provides for America's fire service and stand ready to assist the federal government when called upon.

Sincerely,

A handwritten signature in black ink that reads "John E. Parow". The signature is written in a cursive style.

Chief Jack Parow, MA, EFO, CFO  
President and Chairman of the Board



The International Association of Fire Chiefs (IAFC) believes that the lead federal agency for Emergency Medical Services (EMS) would most effectively be located at the Department of Homeland Security (DHS).

DHS has a duty both to reduce the loss of life and property and protect the nation. The IAFC, which represents the leadership of over 1.2 million firefighters and emergency responders and has an active section of member chiefs who are dedicated to providing quality EMS response in their communities, shares the same mission to protect the lives of those entrusted to our care in their time of need.

During a national emergency, whether from a natural disaster or a terrorist attack, effective EMS response will be a primary expectation of Americans. We strongly believe that pre-hospital emergency medical service response is primarily a public safety function, focused on service to the community and the nation, not profit. While there are a variety of EMS delivery systems across the country, EMS has been a significant and core service provided by the fire service for more than 50 years. Our personnel are largely cross-trained, multi-role emergency responders (i.e.: firefighter/EMTs, firefighter/paramedics, etc.) and EMS calls comprise more than 70 percent of all calls for many fire departments. Regardless of the delivery system model, the public expects and deserves well-trained EMS personnel who are able to respond competently 24/7 and especially during national emergencies.

### **The Role of the Federal Government**

Focusing attention for EMS at DHS aligns with the first point of DHS's six-point agenda: "Increase overall preparedness, particularly for catastrophic events."<sup>i</sup> In fact, some believe that the Department of Homeland Security has already been authorized as the lead federal agency for EMS. The "Homeland Security Act of 2002" (Public Law 107-296) included "emergency medical" in the definition of the term "emergency response providers."<sup>ii</sup> In addition, expertise in emergency medical services was included as criteria for selection of university-based centers for homeland security.<sup>iii</sup>

After Hurricane Katrina, the Federal Emergency Management Agency (FEMA) Administrator was given the responsibility to oversee the Metropolitan Medical Response System as part of the federal government's response to terrorist attacks, major disasters, and other emergencies.<sup>[i]</sup> Also, the Post-Katrina Emergency Management Reform Act (Title VI of Public Law 109-295) established the Chief Medical Officer as a statutory presidentially-appointed position with the primary responsibility to ensure "internal and external coordination of all medical preparedness and response activities of the Department."<sup>[ii]</sup> Currently, the U.S. Fire Administration (USFA) and the National Fire Academy offer EMS training courses, and the mission of the USFA "is to provide national leadership to foster a solid foundation for our fire and emergency services stakeholders in prevention, preparedness, and response."<sup>[iii]</sup>

## **What should a lead federal agency for EMS do or be responsible for?**

- We envision a lead federal agency for EMS to be operationally-based, structured and operated similarly to the United States Fire Administration (USFA).
- An effective lead federal agency for EMS should:
  - be more of an overarching agency, providing guidance and addressing major EMS issues throughout country.
  - provide advocacy and leadership when they see trends develop.
  - serve as a mouthpiece for EMS and advocate for personnel and patient safety.
  - establish programs and/or systems from an educational and research standpoint, possibly utilizing additional resources at NIST.
  - maintain education and training programs at a “higher level” or the “30,000 foot view”, and not the “how-to” practical elements of the job (i.e. provider level).
  - be able to assist with outside research projects.
  - serve as a repository for EMS statistics.
  - investigate deaths of EMS personnel killed in the line of duty.
  - have staff with operational expertise.
  - be positioned to be able to effectively advocate for resources and outcomes within the DHS, with other federal agencies, the Administration, and as appropriate, with the Legislative Branch.
  - be able to develop and provide evidence-based standards, especially to improve safety of personnel and patients.
  - be able to administer grants.
  - function as a national EMS coordinating group.
  - respond to scenes or deploy personnel only when nationalized under FEMA.

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<sup>i</sup> DHS Six-point Agenda, 2005

<sup>ii</sup> 6 U.S.C. § 101 (6)

<sup>iii</sup> 6 U.S.C. §188 (b)(2)(B)(iii)

<sup>[i]</sup> 6 U.S.C. §314 (3)(C)

<sup>[ii]</sup> 6 U.S.C. §321e(c)(3)

<sup>[iii]</sup> USFA website, <http://www.usfa.dhs.gov/about/>