



## **Position Statement:**

### **08-03, Department of Homeland Security - National Response Framework**

The International Association of EMS Chiefs (IAEMSC) represents the Chief EMS operational officials responsible for EMS response in the United States. Annually, these Chief Officers oversee and manage millions of emergency responses to medical emergencies throughout the nation in the urban, suburban, rural and wilderness environments.

The IAEMSC believes the National Response Framework is fundamentally a move in the right direction which will support response to significant incidents and disasters. The lessons learned from recent large scale responses have pointed to the underlying need to develop doctrinal principals which address the inherent challenges of command, control, communication and coordination.

The delivery models of local pre-hospital EMS are diverse. Frequently, the local pre-hospital EMS organizations operational capability is based upon efficiency of operations, and resources to sustain day-to-day service. Therefore, it is vital that EMS operational officials be consistently engaged in the development and conduct of coordinated local, regional, state and federal pre-hospital EMS response strategy and tactics. Fundamentally, the supporting documents of the National Response Framework lack the integration of Pre-hospital EMS operational officials to guide the preparation, planning and response Target Capabilities for pre-hospital EMS as referenced in the National Preparedness Guideline. Improvements should be made to insure that command, control, communications, and coordination of initial pre-hospital EMS is capable and scalable both horizontally and vertically across the jurisdictional landscape. Further, it is clearly not the role of regulatory agencies or officials at the local, regional, or state level to manage pre-hospital resources in preparation for or in response to a large scale incident.

Operations capabilities must be supported and advised by EMS response professionals. The challenge of large scale EMS response will be the deployment, integration, and control of EMS assets from multiple jurisdictions. Initial response must be facilitated and coordinated through well-tested mutual aid agreements that exist at the local, regional or state level. The development of situational awareness for pre-hospital EMS capability and the communication process analogous to law enforcement and the fire service is lacking and needs to be developed further.

Effective pre-hospital EMS services must be coordinated with public safety, health care and public health partners. Participation of operational EMS responders should be required in the creation of regional and state-level plans. These efforts should be focused on management of a rapidly escalating EMS response. The IAEMSC is supportive of the concept of development and maintenance of scalable and flexible response capabilities. Further, the recognition of this approach demonstrates an insightful recognition of the critical need to develop effective, flexible response assets across doctrinal boundaries. The International Association of EMS Chiefs feels it is critical that the process of resource management for EMS assets should be carried out through existing local, regional, state, and federal resource management systems that are well identified within the Emergency Management community. EMS resources should be ordered and supplied using the existing Resource Typing Guidelines as developed by FEMA and should be packaged in accepted strike team and task force structures. Though the Division understands the need to identify additional EMS assets based upon identified weaknesses in

past responses (thus the recent GAO Ambulance Procurement Document), the procurement of EMS resources as a simple commodity does not recognize the complexities inherent in effective EMS operations and further weakens the integration of EMS functions into the incident management structure.

The ability to effectively deploy EMS assets is also dependent upon inclusion of experienced EMS operations professionals into the various ICS structures deployed throughout a large scale-high impact incident; from the Secretary's Emergency Operations Center at Health and Human Services to the DHS National Operations Center and local Incident Command Post, the inclusion of EMS command and general staff qualified personnel is critical to the effective response to an incident involving mass casualties. The command system of the federal medical response assets must be integrated into the local unified command structures. Clear delineation of responding EMS assets and their capabilities through the Unified Command structure is essential. The concept of local control of the management of the incident is crucial and all medical response assets must integrate and support the existing, local command structure. To insure that this process is fully integrated in the local, regional, state and federal command structures, EMS operational professionals must be integrated all levels of preparedness, response and recovery of any incident.

Local EMS providers, in cooperation with other local, state and regional response agencies must remain at the forefront of this response. Authority over pre-hospital response at the local, state and regional level must remain in the hands of EMS operational officials. The International Association of EMS Chiefs believes that to effect the required response across the diverse pre-hospital EMS spectrum, integration of senior EMS operations officials at all levels of preparedness and response will enhance the National Response Framework and associated supporting documents and, most importantly, strengthen the ability of our country's pre-hospital EMS agencies and systems to care for those rendered injured or ill during high impact incidents.

**Therefore, it is the position of the International Association of EMS Chiefs to support the National Response Framework with following suggestions:**

Incorporate the resources and expertise of the International Association of EMS Chiefs into the NRF development and refinement process.

Ensure inclusion of EMS Chief Officers in the development of all prevention, preparedness, response and recovery planning and management of deployment and on-scene operations.

Ensure vertical and horizontal integration of situational communications process to Pre-Hospital EMS officials during Incidents of National Significance.

Pre-hospital EMS assets should be a part of existing resource ordering systems as promulgated by the emergency management community and not treated as a commodity.

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