FICEMS
Federal Interagency Committee on EMS

December 19, 2011

The Honorable Daniel K. Inouye
Chairman, Committee on Appropriations
United States Senate
Washington, DC 20510

Dear Senator Inouye:

As the current Chairperson of the Federal Interagency Committee on Emergency Medical Services (FICEMS), I am pleased to provide the 2010 annual report on the activities, actions and recommendations of the Committee. This report was prepared in accordance with section 10202(a)(7) of the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy For Users (SAFETEA-LU, Pub. L. No. 109-59.

Congress created FICEMS to ensure coordination among Federal agencies involved with emergency medical services (EMS) and 911 services; identify EMS and 911 needs; recommend new or expanded EMS and communication technologies; identify ways to streamline the process through which federal agencies support EMS; assist State, local, tribal or regional EMS in setting priorities; and, advise, consult, and make recommendations on matters related to implementation of coordinated State EMS programs.

The Administrator of the National Highway Traffic Safety Administration (NHTSA), in cooperation with the Administrator of the Health Resources and Services Administration of the Department of Health and Human Services (HHS) and the Assistant Secretary of the Office of Health Affairs (OHA) of the Department of Homeland Security (DHS), provide administrative support to the Committee, including scheduling meetings, setting agendas, keeping minutes and records, and producing reports. NHSTA Administrator David L. Strickland served as FICEMS Chairperson through 2010.

The Committee has made progress in all areas identified by Congress through meetings held in June and December 2010 and regular meetings of its Technical Working Group. Most notably, the Committee agreed to begin a strategic planning process which will help to align the priorities of all member agencies toward common goals and continue to ensure that efforts are not duplicated. This report highlights many of the significant achievements of the group in 2010, which has been successful through growing interagency partnerships and a collaborative approach to program execution.

Department of Defense
Office of the Assistant Secretary of Defense for Health Affairs

Department of Homeland Security
Office of the Assistant Secretary for Health Affairs/Chief Medical Officer
U.S. Fire Administration

Department of Health & Human Services
Office of the Assistant Secretary for Preparedness and Response
Indian Health Service
Centers for Disease Control and Prevention
Health Resources and Services Administration
Centers for Medicare & Medicaid Services

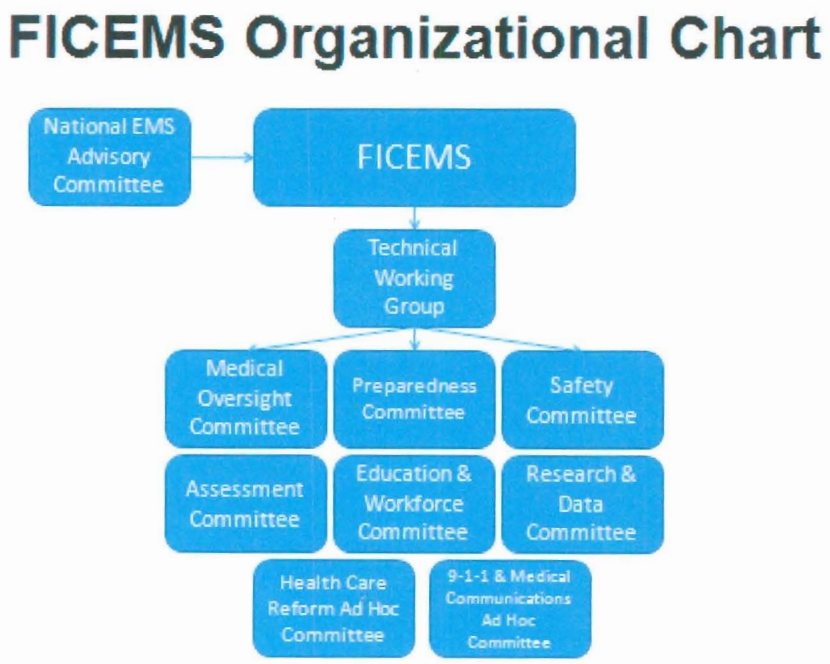
Department of Transportation
National Highway Traffic Safety Administration

Federal Communications Commission
Public Safety and Homeland Security Bureau

FICEMS c/o
Office of Emergency Medical Services
1200 New Jersey Avenue, SE
NTI-140
Washington, DC 20590
(202) 366-5440
nhtsa.ems@dot.gov

The FICEMS Technical Working Group

The Committee's Technical Working Group (TWG) is comprised of interagency staff-level employees who meet monthly to provide support to the numerous ongoing FICEMS projects. The TWG has eight committees which monitor the implementation of projects, develop reports, and oversee and comment on ongoing research and working documents. The FICEMS organizational chart is shown below.



Key elements of the work undertaken by FICEMS and its Technical Working Group results from non-federal input from the Federal Advisory Committee Act compliant National EMS Advisory Council (NEMSAC). This discretionary advisory council created by the Secretary of Transportation in 2007, provided a number of recommendations to FICEMS and its member agencies during 2010. Recommendations from the NEMSAC to the Federal Interagency Committee on EMS include:

- NHTSA should work with FICEMS to assure integration and utilization of EMS illnesses, injury, and fatality surveillance databases across federal agencies.
- FICEMS should support a Federal effort to expand, enhance and fund EMS research based on operational, financial, and medical outcomes criteria.
- FICEMS should adopt the EMS Culture of Safety as a core value and support it in their agency grants, programs and policies.

To foster greater coordination with the national EMS community, FICEMS and the National EMS Advisory Council held consecutive meetings in December 2010.

The National EMS and 911 Stakeholders Meeting

In March 2010 FICEMS convened a stakeholders meeting attended by approximately 130 EMS stakeholders, including public safety, public health, fire agencies, law enforcement, emergency management, and 9-1-1 dispatchers, federal partners, and FICEMS members. The meeting was funded by the DHS OHA and was intended to bring together national leaders in EMS and 911 to discuss topics ranging from administration to clinical and operational issues to EMS data and research. Minutes of the meeting have helped to inform the projects of FICEMS member agencies.

Discussion of Federal Grants to Improve Pandemic Influenza Preparedness for EMS Systems

In November 2009, FICEMS published a report entitled *State EMS System Pandemic Influenza Preparedness: A Report of the FICEMS.* The report provided detailed analysis of state EMS and 9-1-1 pandemic influenza preparedness gaps and outlined five recommended strategies and associated action steps to be taken by FICEMS member agencies to improve EMS system preparedness nationally. Among the report's recommended strategies is the creation of "*...a new State EMS System Pandemic Influenza Preparedness grant program to address pandemic influenza preparedness gaps that are outside of the statutory scope of existing preparedness grant programs.*"

FICEMS held an executive session in October 2010 to consider recommending a possible federal grant for improving EMS system Pandemic Influenza Preparedness. FICEMS will conduct further internal discussion on this issue as part of the FICEMS strategic planning process.

Endorsement of Key Guidelines for Field Trauma Triage

At the June 2010 meeting, FICEMS endorsed the use of the Centers for Disease Control and Prevention (CDC) *Field Trauma Triage Guidelines* for EMS providers. According to the CDC:

> In the United States, injury is the leading cause of death for persons aged 1- 44 years, and the approximately 800,000 emergency medical services (EMS) providers have a substantial impact on the care of injured persons and on public health. At an injury scene, EMS providers determine the severity of injury, initiate medical management, and identify the most appropriate facility to which to transport the patient through a process called *field triage*. (CDC Morbidity and Mortality Weekly Report, January 23, 2009, 58(RR01); 1-35)

The evidence-based guidelines endorsed by the Committee are meant to be used by EMS providers to standardize the decision making process when transporting injured patients to either the closest medical facility or a specially designated trauma hospital.

Monitoring Health Care Reform Implementation and EMS

Following the passage of the Patient Protection and Affordable Care Act (PPACA) in March 2010, FICEMS approved the creation of an ad hoc committee to monitor the implementation of health reform activities as they relate to emergency medical services. The committee identified four sections of PPACA (sections 3013/4, 3021, 3504 and 5101) that related directly or indirectly to the provision of EMS. FICEMS sent letters to the following agencies and organizations offering the assistance of FICEMS in implementing sections of the law:

- The HHS Assistant Secretary for Preparedness and Response
- The HHS Centers for Medicare and Medicaid Services
- The Comptroller General of the United States
- The National Quality Forum

A National EMS Culture of Safety Strategy

At the June 2010 meeting, FICEMS approved a position statement on EMS safety and health. The vision adopted by FICEMS is "*A culture that instills safety and health as paramount to all components of Emergency Medical Services.*" The Committee is also closely engaged with NHTSA's EMS Culture of Safety project. The 36 month project, which began in August 2010 and received funding from HRSA's EMS for Children program, was competitively awarded to the American College of Emergency Physicians and will bring together hundreds of EMS stakeholders and safety experts to develop a strategy to foster a culture of safety in the EMS profession.

The National EMS Assessment

To fulfill the Committee's statutory obligation to identify needs of EMS and 911 systems at all levels, in the fall of 2009 NHTSA awarded a contract to the University of North Carolina EMS Performance Improvement Center to conduct an initial National EMS Assessment and create a model for ongoing periodic national assessments.

In 2010, the EMS Performance Improvement Center continued to compile national EMS data. The Principal Investigator presented a briefing to FICEMS in June and December 2010 describing the strategies used to identify, compile and assess existing EMS data from numerous sources. A final draft of the report is expected to be delivered in the fall of 2011.

National Transportation Safety Board Recommendations on Rural Roadway EMS Response

On January 6, 2008 a motor coach carrying 52 passengers and a driver overturned on a rural road in Mexican Hat, Utah resulting in 44 injuries and 9 fatalities. According to a National Transportation Safety Board (NTSB) investigation, emergency medical notification and response to motor coach crashes in rural areas were major issues in the damage resulting from this crash. The NTSB issued two safety recommendations to FICEMS in 2009:

- *Develop a plan that can be used by States and public safety answering points to pursue funding for enhancements of wireless communications coverage that can facilitate prompt accident notification and emergency response along high risk rural roads, as identified under SAFETEA-LU criteria, and along rural roads having substantial large bus traffic (as defined by the criteria established in NTSB Safety Recommendation H-09-07). (H-09-04)*

The FICEMS 911 & Medical Communications Ad Hoc Committee oversaw the development of a response to recommendation H-09-04, which was approved by FICEMS in December 2010. The approach included soliciting input for the plan from a variety of emergency communication, highway safety and motor coach stakeholders at the local, State, national and Federal levels, in both the public and private sectors. The final response can be viewed online at http://ems.gov/pdf/2010/DecMtg/Response_NTSB_Recommendation_1.pdf.

- *Evaluate the system of emergency care response to large-scale transportation-related rural accidents, and, once that evaluation is completed, develop guidelines for emergency medical service response and provide those guidelines to the States. (H-09-05).*

The FICEMS Preparedness Committee is overseeing projects that have been initiated with the National Association of State EMS Officials and with the Institute of Medicine in response to recommendation H-09-05 and expects to complete these projects and to seek approval of a FICEMS response to NTSB response by December 2011.

National Transportation Safety Board Recommendations on the Use of Helicopter EMS
In response to a series of Helicopter Emergency Medical Services (HEMS) crashes in 2008 and as a result of an overall increase in fatal accidents involving HEMS operations, the NTSB issued two additional safety recommendations to FICEMS in 2009:

- *Develop national guidelines for the use and availability of helicopter emergency medical transport by regional, State, and local authorities during emergency medical response system planning. (A-09-102)*

The FICEMS Medical Oversight Committee is overseeing the response to these recommendations. Recommendation A-09-102 is being addressed through an interagency agreement between the Centers for Disease Control and Prevention (CDC) and the National Highway Traffic Safety Administration (NHTSA). The agreement, funded by NHTSA in 2010, calls for the CDC, with input from NHTSA, to convene a panel of experts in Helicopter EMS and emergency medicine to develop guidelines for the use and availability of air ambulances. The agencies met twice via conference call to discuss panel membership and to develop an agenda for the expert panel meetings.

- *Develop national guidelines for the selection of appropriate emergency transportation modes for urgent care. (A-09-103)*

Recommendation A-09-103 is being addressed by developing evidence-based guidelines to describe the clinical conditions in which air ambulance transport would be recommended for

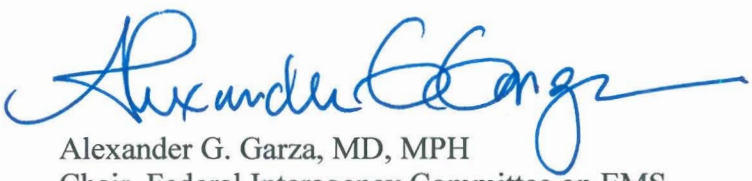
patients with traumatic injury. The National Prehospital Evidence-based Guideline Model Process is being pilot tested through a cooperative agreement between with Children's National Medical Center, in Washington, DC and NHTSA with funding and logistical support from the EMS for Children program. An expert panel was convened to develop the clinical review questions and to research existing clinical evidence. The panel has developed draft guidelines that will be included in a manuscript to be submitted for publication in a scientific peer-reviewed journal.

Finally, a coordinated Web portal (www.EMS.gov) continues to be maintained by NHTSA as a single location for the public to access EMS program information from all Federal agencies.

FICEMS and its TWG continue to ensure Federal EMS interagency collaboration and coordination and identify opportunities for improving emergency medical services throughout the nation. On behalf of the Committee and its members, we are grateful for the support received from Congress.

A similar letter has been sent to the enclosed list of Congressional Committees.

Sincerely yours,



Alexander G. Garza, MD, MPH
Chair, Federal Interagency Committee on EMS
Assistant Secretary for Health Affairs
and Chief Medical Officer
U.S. Department of Homeland Security

Enclosures