

# FICEMS STRATEGIC PLAN



APRIL 2021



**FICEMS**  
Federal Interagency Committee on EMS

## Preface

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This strategic plan was developed by the Federal Interagency Committee on Emergency Medical Services (FICEMS) to guide its efforts to support and advance emergency medical services (EMS) and 911 services in the Nation over the next five years (2021–2025). The content was developed through a collaborative process involving FICEMS members, its Technical Working Group, and other Federal and national association stakeholders with knowledge of FICEMS operations and the missions of the EMS and 911 systems. The strategic planning effort was funded by the U.S. Department of Transportation, National Highway Traffic Administration.

The strategic planning process benefitted from those who attended working meetings to develop goals and objectives as well as those who provided comments and feedback on the plan. The strategic planning process was also informed by input from those who participated in FICEMS and National EMS Advisory Council meetings in 2019 and 2020.



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## Introduction

The United States Congress mandated the creation of the Federal Interagency Committee on Emergency Medical Services (FICEMS) in 2005 to coordinate Federal agencies supporting state, local, tribal, and territorial (SLTT) emergency medical services (EMS) and 911 systems. FICEMS was created by the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU) to also improve the delivery of EMS and 911 systems throughout the Nation. This founding legislation (Public Law 109–59) directed the U.S. Departments of Transportation (DOT), Homeland Security (DHS), and Health and Human Services (HHS) to establish FICEMS and defined its purposes and membership.<sup>1</sup>

Accordingly, FICEMS addresses its charge from Congress by:

- Ensuring coordination among the Federal agencies involved with Federal and SLTT EMS and 911 systems
- Identifying Federal and SLTT EMS and 911 systems needs
- Recommending new or improved Federal programs for improving EMS and 911 systems, including grant programs
- Identifying ways to streamline the process through which Federal agencies support SLTT EMS and 911 systems
- Assisting SLTT EMS and 911 systems in setting priorities based on identified needs
- Advising, consulting, and making recommendations on matters related to implementation of coordinated SLTT EMS and 911 programs

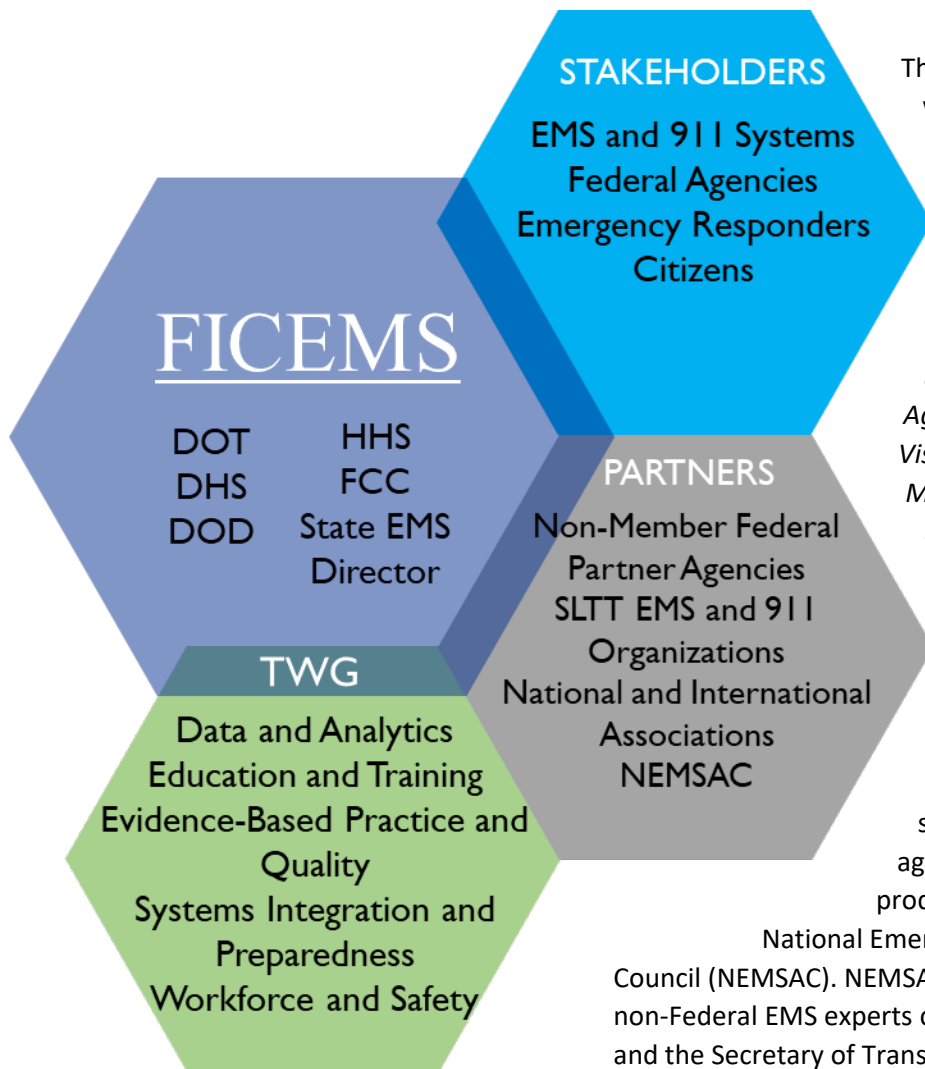
FICEMS conducts its activities through an organizational structure consisting of FICEMS members, the Technical Working Group (TWG), and TWG Subgroups. FICEMS membership includes representatives from DOT, DHS, HHS, the U.S. Department of Defense (DOD), the Federal Communications Commission (FCC), and a state EMS Director.

The TWG is a working body of staff representatives that support FICEMS. The TWG meets monthly and coordinates EMS activities of the Federal Government. TWG Subgroups meet routinely and support the work of FICEMS by providing specialized expertise to both the TWG and FICEMS.



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<sup>1</sup> Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users. <https://www.govinfo.gov/content/pkg/PLAW-109publ59/pdf/PLAW-109publ59.pdf>



Through the TWG, FICEMS partners with members of various Federal agencies and offices, SLTT EMS and 911 agencies, and national and international trade associations to fulfill its mission. The purposes of FICEMS outlined in SAFETEA-LU and the guiding principles of *EMS Agenda 2050: A People-Centered Vision for the Future of Emergency Medical Services* shape FICEMS strategic goals toward advancing EMS and 911 systems throughout the Nation.<sup>2</sup>

The National Highway Traffic Safety Administration (NHTSA) Office of EMS provides primary administrative support (e.g., scheduling meetings, setting agendas, keeping records, and producing reports) to FICEMS and the

National Emergency Medical Services Advisory Council (NEMSAC). NEMSAC is a Federal Advisory Council of non-Federal EMS experts created in 2007 to advise FICEMS and the Secretary of Transportation on matters related to EMS.<sup>3</sup>

Given the significant responsibilities of FICEMS, it is essential that the organization operate in accordance with a strategic plan. This strategic plan demonstrates FICEMS continued commitment to supporting the EMS and 911 communities. The plan will guide FICEMS work in the immediate future and will serve as a guide for future strategic efforts. It provides a framework around which FICEMS can synchronize the efforts and strategies of its member agencies under common goals while avoiding duplication of effort.

## Strategic Planning Process

This strategic plan was developed through a collaborative process involving FICEMS and its TWG. Content development for the plan included virtual TWG meetings and facilitated sessions in a four-phase process. In addition to the TWG meetings, other important sources of input to the development of the strategic plan included the FICEMS 2019 Strategic Plan White Paper and discussions during FICEMS and NEMSAC meetings in 2019 and 2020.

<sup>2</sup> *EMS Agenda 2050: A People-Centered Vision for the Future of Emergency Medical Services*. <https://www.ems.gov/pdf/EMS-Agenda-2050.pdf>

<sup>3</sup> National EMS Advisory Council. <https://www.ems.gov/nemsac.html>



## Visioning

The first phase of the strategic planning process focused on FICEMS defining its value proposition and stakeholders served. The TWG conducted group discussions to achieve agreement on the type of, and level of detail for the strategic plan, the timeline for completing the plan, major stakeholders served by FICEMS, and FICEMS value proposition. The TWG developed the logic model below to combine the results of the visioning sessions and help guide further strategic plan development.

FOCUS AREAS	PROGRAMS	STAKEHOLDERS	OUTCOMES (near)	OUTCOMES (long)		
Data & Research	Health Data Integration and Management	Federal, SLTT EMS and 911 systems Federal Agencies Emergency Responders Citizens	Consistent, standardized performance measures for EMS Efficient, accurate emergency care Evidence-based guidelines Standardized patient data Compliance with legislative statute	Guidelines for future pandemic and other public health crisis response Efficient coordination among Federal agencies for EMS, 911, public health response, and preparedness Well-prepared and trained EMS and 911 workforce People-centered emergency care and community paramedicine		
Education & Training	Training EMS Education Standards					
Workforce	National Scope of Practice					
Interagency Coordination	Federal Program Awareness Public Health/All-Hazards Response Federal Operational EMS Collaboration					
Preparedness Coordination	EMS Risk Management Innovative Emergency Care Community Paramedicine Mobile Integrated Healthcare	PARTNERS Non-Member Federal Partner Agencies SLTT EMS and 911 Organizations NEMSAC				
Safety	EMS/Patient Incident Reporting and Prevention					
Advisory Functions	NEMSAC Coordination Advise Congress	National and International Associations				
Guidance & Standards	Grant Guidance SLTT Needs and Requirements					

## Organizational Processes

The second phase of the strategic planning process focused on FICEMS reviewing and considering updates to its membership, operating structure, operating procedures, and external communication preferences. The TWG conducted group discussions to achieve agreement on critical updates to ensure FICEMS can meet the evolving needs of EMS and 911 systems, while remaining compliant with the SAFETEA-LU statute.

## Strategic Planning

The third phase of the strategic planning process focused on developing content for the strategic plan. The TWG conducted group discussions to achieve agreement on renewed mission, vision, goals, and objectives based on FICEMS accomplishments to date and the previous visioning and organizational processes phases.

## Finalization

The final, fourth phase of the strategic planning process focused on finalizing and presenting the strategic plan. The TWG ushered the draft strategic plan through the appropriate review, routing, and concurrence process to develop a final document, including discussion of the strategic plan during the December 2020 FICEMS Meeting.

## **MISSION STATEMENT**

Ensure coordination and consistency among Federal agencies supporting Federal, state, local, tribal, and territorial emergency medical services and 911 systems to improve the delivery of services throughout the Nation

## **VISION STATEMENT**

A Federal interagency committee that enhances coordination and strategically aligns emergency medical services and 911 systems priorities among Federal agencies to ensure safe and effective delivery of healthcare in the out-of-hospital environment

## Strategic Goals and Objectives

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Strategic goals focus an organization's efforts toward its common mission and vision. The strategic goals in this plan are designed to help FICEMS achieve its mission and vision by ensuring that FICEMS coordinates Federal interagency policies, programming, and messaging, as well as gathering and integrating stakeholder input.

FICEMS developed seven goals that address advances in EMS and 911 systems and FICEMS effectiveness in conducting its mission as a Federal interagency committee. Associated objectives identify FICEMS targets for meeting its strategic goals. These goals and objectives align with FICEMS purposes described in SAFETEA-LU and the guiding principles of *EMS Agenda 2050*. For more detail on such alignment, see Appendix D.

### **Goal I. Coordinated and integrated Federal, state, local, tribal, and territorial EMS and 911 systems that provide safe and efficient high-quality patient care**

One of FICEMS most important and influential purposes as an interagency committee is to support coordination of Federal and SLTT government on EMS and 911 systems. With many disparate missions, goals, programs, and activities across all levels of government, it is imperative that FICEMS work to streamline efforts, deconflict policy and guidance, and work toward common goals. FICEMS will continue to lead Federal agencies in coordinating efforts toward a more unified mission and goals to enhance EMS and 911 systems throughout the Nation.

#### **Objective I.1: Promote the comprehensive identification and dissemination of clinical best practices in EMS and emergency medical care, including treatment for time-critical and sensitive conditions**

FICEMS will leverage its unique coordination and collaboration capabilities across the Federal Government to promote the development of a system to collect, highlight, and broadcast clinical best practices in out-of-hospital and emergency care. Innovations in care across the healthcare spectrum will be identified and incorporated in EMS and 911 guidance, focusing on time-sensitive conditions such as cardiac arrest and stroke and related EMS practices. Improvements in response and care for such situations can lead to significant reductions in adverse outcomes for patients.

#### **Objective I.2: Promote measurement and reporting of the relationship between EMS care and outcomes, especially for time-critical and sensitive conditions**

There has historically been a lack of data and research surrounding the results of EMS and 911 response and care on patient outcomes. To integrate EMS and 911 operations more fully into the overall healthcare spectrum and improve patient outcomes, research, measurement, and reporting of outcomes relative to EMS practices can be expanded and promoted. Such efforts can lead to the development of best practices and performance measures that could also be standardized, potentially improving outcomes, especially for time sensitive conditions such as cardiac arrest and stroke. FICEMS will promote outcomes research and data integration across the healthcare spectrum (including drawing from public health surveillance data across the Nation), as well as the development and dissemination of best practices, performance measures, and standards.

#### **Objective I.3: Identify and promote best practices to reduce health disparities in care within Federal EMS programs, including supporting states through improving data quality and standardization**

Accurate, reliable, and consistent data across the healthcare spectrum is a common goal among many healthcare professionals. Reliable data allows researchers and Federal programs to make recommendations and develop guidance to address differences (and potentially inequalities) in EMS care and practices.



EMS practices vary across different geographical areas and demographics. FICEMS will identify and promote the best practices and performance measures of Federal EMS programs that can be aligned across the Federal Government, as well as integrated in EMS systems across the Nation to differentiate services when appropriate and resolve disparities when needed. FICEMS will also continue to support the collection of reliable, standardized EMS data at SLTT levels to minimize disparities in care.

**Objective 1.4:** Collaborate with Federal, state, local, tribal, and territorial EMS and 911 systems and professional associations to support and establish comprehensive EMS and 911 systems consistent with national standards

As the primary Federal interagency organization to coordinate national efforts to improve EMS and 911 systems, FICEMS has the unique capability to bring together the most influential and effective stakeholders to help EMS and 911 systems across the Nation develop and implement national-level standards. A potentially effective method for developing and promoting national standards would include identifying best practices and lessons learned from Federal operational EMS programs and developing relevant guidance for EMS and 911 organizations across the Nation. Such guidance could be leveraged to develop new national standards. FICEMS will continue to work with its members and partners in Federal agencies (including existing relevant Federal efforts in emergency communications), SLTT government, and national and international professional associations (see Appendix B for a listing of FICEMS members and partners) to develop and promote national standards that enhance EMS and 911 systems.



### **Objective 1.5: Identify and promote the development and maturation of Federal EMS operational programs to provide optimized patient care to the unique populations they serve**

Multiple Federal agencies maintain operational EMS programs (e.g., DHS, DOD, U.S. Department of Interior [DOI], U.S. Department of State, U.S. Department of Agriculture U.S. Forest Service). Though not part of the traditional EMS environment, these programs can offer best practices and innovations applicable across EMS and 911 systems. FICEMS will support the integration of these Federal EMS programs with SLTT EMS and 911 systems. To improve the development and maturation of EMS and 911 systems, FICEMS will develop a mechanism for routinely identifying the needs and best practices of EMS and 911 systems based on national level EMS and 911 assessments (including existing Federal efforts to address communications best practices) and the National Emergency Medical Services Information System (NEMSIS). FICEMS will support assessments of needs and best practices, the results of which can be used to develop gap analyses to identify EMS or 911 entities' capabilities relative to a given best practice. This information could be used to establish individualized baselines and identify steps to be taken to achieve the best practice.

## **Goal 2. Data-driven, evidence-based, and standardized EMS and 911 systems that help to improve the quality of out-of-hospital patient care**

Research, data gathering, analysis, and information sharing are the building blocks for establishing systems that support quality care services. A people-centered approach to EMS and 911 that includes more seamless systems with improved coordination requires evidence-based practices and enhanced integration of out-of-hospital, hospital, and other healthcare data. Integrating data systems and allowing more access to critical information can help out-of-hospital, hospital, and other clinicians provide safer, more effective, and more efficient patient care. FICEMS will continue to work with both Federal and non-Federal stakeholders to develop evidence-based guidelines (EBGs) of care and enhance data and information-sharing systems (including collaboration among different Federal EMS and fire data collection systems, such as NEMSIS and the National Fire Incident Reporting System [NFIRS]), all in pursuit of improved patient outcomes.

### **Objective 2.1: Support the development, implementation, and evaluation of evidence-based guidelines (EBGs) according to the National Prehospital EBG Model Process**

FICEMS supports the use of EBGs, developed on a sound foundation of data and research, to improve coordination of patient care and integration of out-of-hospital and hospital systems. EBGs afford EMS practitioners the foundation to provide patient care based on the best available scientific knowledge of out-of-hospital care practices. EBGs are flexible and widely applicable to allow SLTT guidelines to consider local population needs and available resources. In addition, they are an important element in improving the quality of out-of-hospital care, as they promote a consistent approach by out-of-hospital practitioners for a given clinical scenario, and thus facilitate the development of standards for measures to evaluate the quality of out-of-hospital emergency care. FICEMS will continue to provide subject matter expertise and guidance on EBG development of its Federal and non-Federal partners.

### **Objective 2.2: Promote standardization and quality improvement of out-of-hospital EMS data by supporting the adoption and implementation of NEMSIS-compliant systems**

Standardized and accessible patient data is essential to the improvement of out-of-hospital emergency care and the integration of EMS into the broader healthcare system. Though there are many different standards used today that support data sharing and integration, practitioners disagree about how well data can be integrated between the different standards and how well the standards can meet requirements outside of the environment for which they were intended. NEMSIS was established in 2001 as the national database system

for EMS data from U.S. states and territories to support such improvement and integration.<sup>4</sup> The availability and enhancement of standardized NEMSIS data assists in ensuring quality of care through effective medical oversight, supporting EMS research, and providing overall EMS system accountability. FICEMS will continue to promote NEMSIS as the effective central point of EMS data from which integration across the healthcare spectrum can flow. FICEMS will coordinate advancement of NEMSIS to successive updated versions of the system, support development of guidance for NEMSIS adoption and integration, and coordinate dissemination of references for EMS stakeholders on integrating NEMSIS data with SLTT health information exchanges (HIEs) and other data systems.

### **Objective 2.3: Promote the development of clinical research and scientific evidence regarding out-of-hospital patient care**

Medical advances can effect changes in EMS and 911 operations. Advancements from across the healthcare community (including development and application of international best practices and lessons learned) lead to new protocols, methods, techniques, and practices adopted in EMS. As advancements are adopted, specialized EMS skills, personnel, and facilities may be developed. In addition, research into existing practices can highlight areas in need of improvement, opportunities to increase effectiveness, and lead to updated standards of care. FICEMS will continue to promote ongoing research into out-of-hospital patient care and leverage its collaboration among Federal agencies to support, identify, and disseminate relevant clinical research and evidence.

### **Objective 2.4: Improve the integration of NEMSIS data and other data sources to measure system effectiveness and improve clinical outcomes**

The wealth and breadth of EMS data collected by NEMSIS is vast. Improving the sharing and integration of this data can lead to system-wide improvements in EMS and 911, including patient outcomes. EMS practitioners typically know very little about the patient when they arrive at a scene. They must make critical, time-sensitive decisions with minimal information. They also routinely do not know what happened to their patients after transferring these patients to a hospital or other facility. Without feedback, EMS practitioners will continue their standard procedures and will not have the opportunity to learn how to improve their care delivery. FICEMS will continue to support and promote the integration of NEMSIS and other data exchanges to close the feedback loop, help practitioners make better decisions, and improve their diagnostic accuracy and clinical decision making. These data could be used as benchmarks to help EMS practitioners improve and be held accountable for excellence and quality improvement.

### **Objective 2.5: Promote the evaluation of the characteristics of EMS and 911 systems that are associated with high-quality care and improved patient outcomes**

Evidence-based research into the linkages between effective EMS practices and improved patient outcomes is an area of growth and opportunity for EMS systems across the Nation. EMS practitioners are more readily able to enact improvements when appropriate data is collected on outcomes. That which is measured well can be studied and improved upon. The characteristics of successful, effective EMS systems can be identified and developed into broadly applicable guidance, performance indicators, and benchmarks. FICEMS will collaborate with its Federal partners to promote research into such characteristics and the development of related guidance. While the development of data-driven 911 practices typically lags behind EMS practices, models used for EMS could be adopted by 911 agencies to develop and implement analogous systems and practices.

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<sup>4</sup> National EMS Information System. <https://nemsis.org/>

FICEMS members will advocate for lessons learned to be shared as well as the development and adoption of data-driven 911 practices.

**Objective 2.6: Promote the use of technology that enables enhanced bidirectional information exchange for increased situational awareness, operational efficiency, and safety**

Technology has made it possible for EMS and 911 systems to provide and receive real-time data that can help with decision-making, from patient's health records to safety information about a response location. The use of this technology can enhance time-sensitive care for patients in need. Advanced bidirectional information sharing can increase the speed of interfacility transfer and improve patient care by making the process more efficient. Equipment and technology that enhances this information sharing is readily available for EMS practitioners, including patient assessment devices, video and telemedicine equipment, hospital and billing records data sharing software, and mobile applications that tie many of these separate information streams together. As the central Federal interagency organization on EMS and 911 systems, FICEMS can direct attention to effective EMS technology and will promote its use and adoption across the Nation, as well as promote the development of similar technology for 911 systems.

**Goal 3. EMS and 911 systems effectively integrated into Federal, state, local, tribal, and territorial preparedness planning, response, and recovery**

Integration of EMS and 911 systems is an important role for FICEMS in preparedness for all hazards, from natural events to terrorist actions and global pandemics. Integration involves the development of standardized measures for preparedness, as well as strategies for continuous improvement. In today's digital world, the availability of data and seamless interoperability of systems are also vital to all aspects of preparedness. FICEMS will work closely with Federal and SLTT governments to integrate consistent approaches to preparedness and help to ensure the effectiveness of EMS and 911 systems in response and recovery.





### **Objective 3.1: Develop and promote reliable and consistent measures of EMS and 911 systems preparedness**

Standardized measures of preparedness are used to assess how well the Nation's EMS community responds to and recovers from adverse events and to identify both current and future gaps in the level of services. FICEMS has led projects to develop a variety of measures, including a standard set of guidelines for mass casualty triage systems and ways to standardize patient tracking data. Going forward, FICEMS will continue to develop and refine guidelines to promote a seamless and coordinated care system, including considerations of interoperability and communications. This will include coordinated approaches to enable interoperability between jurisdictions and levels of government, assisting with EMS risk management methodologies, and standardized measures for data collection on EMS and 911 preparedness. The EMS Compass Project funded by NHTSA and further work continued by the National EMS Quality Alliance (NEMSQA)<sup>5</sup> provides added support for FICEMS efforts to promote consistency.

### **Objective 3.2: Support coordinated multidisciplinary planning for disasters to improve all-hazards preparedness of EMS and 911 systems**

Many advances have been made in EMS systems preparedness over the past several years, some brought about by rapid innovations in digital and network technology and others in response to national emergencies. An important achievement by FICEMS was the development of a process for rapid interagency coordination during health emergencies, which expedites the distribution of priority materials to EMS and 911 practitioners. This process, developed in response to an Ebola outbreak, now allows EMS and 911 communities to provide early input on priority activities and help ensure national coordination. FICEMS will continue to support ongoing improvement efforts to address preparedness for pandemics and all hazards through multi-disciplinary planning activities. Coordination of emergency response system planning is critical to successful outcomes and requires inputs from multiple disciplines, including EMS, community health care, hospital care, and others.

FICEMS will continue to assist SLTT EMS and 911 organizations with identifying current and future needs, setting priorities, and improving Federal interagency grant alignment. FICEMS will strive to identify needs and innovations that will help EMS and 911 systems be scalable and able to respond dynamically to emerging events.

### **Objective 3.3: Identify and develop strategies to close preparedness gaps in EMS and 911 systems**

In 2015, the National Association of State EMS Officials (NASEMSO) published its *Emergency Medical Services Domestic Preparedness Improvement Strategy*, a consensus-based roadmap to resolve gaps in EMS preparedness. The report identified a number of gaps and areas for improvements, specifically in coordination among services and organizations and gaps in EMS education, training, funding, equipment, policies, and procedures.<sup>6</sup> Since that time, guidelines and best practices have been developed and published to improve the preparedness of EMS systems. More recent surveys and reports such as the *National EMS Assessment* indicate that while progress has been phenomenal, gaps remain in some areas. Some of the challenges reported included inadequacies in data collection systems, inconsistent or limited training for diverse disaster scenarios, differences in how data is collected and aggregated, limited pediatric-specific protocols and equipment, and

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<sup>5</sup> About National EMS Quality Alliance. <https://www.nemsqa.org/about/>

<sup>6</sup> Emergency Medical Services Domestic Preparedness Improvement Strategy. <https://nasemso.org/wp-content/uploads/NASEMSO-EMS-Preparedness-Improvement-Strategy-FINAL-Jan2015.pdf>



availability of consistent or reliable funding. FICEMS will continue to work with its stakeholders to assist in closing preparedness gaps through innovative approaches for managing data, training, best practices, and other aspect important to EMS and 911 system preparedness response.

### **Objective 3.4: Support integration of EMS and 911 systems with interagency preparedness planning and training efforts**

The coordination of crisis planning for emergency response systems is vital to ensuring successful health and medical outcomes. Standards of care under these often chaotic and challenging conditions must merge public health, societal, ethical, and medical care demands to enable effective healthcare service delivery. Federal agencies need to include EMS and 911 systems in national level planning and guidance on incident preparedness, response, and recovery.

FICEMS will support integration of EMS and 911 systems with interagency preparedness through coordination of standardized training, as well as planning activities with Federal agencies and SLTT Emergency Management organizations. A tool to aid in this process is the National Incident Management System (NIMS), which provides guidance for emergency management and promotes coordinated nationwide practices in preparedness planning and response.<sup>7</sup> FICEMS will also coordinate efforts with the Homeland Security Exercise and Evaluation Program (HSEEP),<sup>8</sup> operated by the Federal Emergency Management Agency (FEMA). HSEEP provides guiding principles and approaches for preparedness training exercise and evaluation programs.

## **Goal 4. EMS and 911 systems that are people-centered, sustainable, forward-looking, and integrated with the overall healthcare system**

EMS and 911 systems have continued to evolve dramatically over the last decade with advances in information technology and the ability to connect many devices and systems via the Internet of Things (IoT). Collection and use of health information is highly automated and digitized, making data management a core competency of every successful emergency response systems. In this dynamic environment, EMS and 911 systems need to be continuously evaluated to ensure they meet the evolving needs of people and their communities. Systems must be sustainable, having reliable resources and funding to enable the needed level of care, as well as be adaptable to new technologies and innovations. Perhaps most important, EMS and 911 systems must integrate with the many parts that comprise the health care system, from hospitals and local clinics to public health agencies, emergency management, and public works. Through its diverse stakeholder base, FICEMS has a unique understanding of the factors influencing the operating environment of emergency healthcare and will support forward-looking initiatives supporting the EMS and 911 systems.

### **Objective 4.1: Foster relationships among Federal and SLTT EMS and 911 stakeholders to enhance information sharing and data integration between EMS and 911 organizations, SLTT HIEs, and medical practitioners**

FICEMS will encourage the participation of SLTT EMS and 911 systems in various information and data sharing systems, such as HIEs. HIEs provide automated electronic management and transfer of individual health information across organizations. This enables important health data to go where the patient is when its needed, across geographic and organizational boundaries. Through its relationships with NEMSAC, FICEMS will

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<sup>7</sup> National Incident Management System. <https://www.fema.gov/emergency-managers/nims>

<sup>8</sup> Homeland Security Exercise and Evaluation Program. <https://www.fema.gov/emergency-managers/national-preparedness/exercises/hseep>

continue to foster the relationships key to supporting health information sharing across Federal, SLTT, and private sector organizations. This will improve the linkages that are key to successful information sharing as well as data integration across the healthcare spectrum.

**Objective 4.2: Develop guidance to support the integration of EMS and 911 systems in SLTT public health, public safety, and emergency management programs**

The 2020 COVID-19 pandemic has illustrated the need to better integrate EMS and 911 systems as critical parts of the response and coordination of healthcare during disastrous events. EMS can be a vital part of response coordination—operational during every event and integrated with the healthcare system. 911 systems have long been left out of the push for integration of EMS with the broader healthcare system. FICEMS will develop guidance to support an integrated healthcare system that is inclusive of EMS out-of-hospital care and 911 operations, and determine how to better incorporate EMS and 911 into system-wide response. This includes EMS and 911 as key elements in integrated community paramedicine, responsive in urban as well as rural areas, and coordinated with public health, emergency management, and safety organizations. Integration also means social equity—providing access to emergency care to underserved populations, regardless of age, socioeconomic status, gender, ethnicity, or other social factors.

**Objective 4.3: Evaluate and promote innovative EMS delivery and payment models that may be applicable across EMS systems**

FICEMS is committed to supporting innovations to improve how EMS are delivered, paid for, and reimbursed. While new models have emerged, payment continues to be a challenge for emergency care practitioners, transporters, and EMS medical directors. Pandemics exacerbate these issues due to the changing operational landscape and the larger number of patients served in non-traditional environments. FICEMS TWG led a project to support the development of *EMS Agenda 2050*, which outlines a bold plan for innovative, people centered opportunities to advance EMS systems. One result was the Emergency Triage, Treat, and Transport



(ET3) Model, a voluntary five-year payment model that provides greater flexibility for EMS to transport patients to the most effective emergency services rather than only those currently covered under Medicare. Noted as a ‘watershed moment in EMS delivery,’ the model represents a radical rethinking of incentives and enables EMS to deliver value-based healthcare more reliably.<sup>9</sup> FICEMS will continue to help foster and evaluate the development and implementation of new and alternative payment models for EMS systems.

**Objective 4.4: Develop overarching guidance for EMS and 911 systems on Health Insurance Portability and Accountability Act (HIPAA) requirements and compliance, including how emerging technologies and best practices may be affected**

HIPAA and other technology-related policies can impact current, as well as future delivery of EMS services. Smaller organizations may not have the resources or capability to develop or interpret guidance and determine effective policies for their individual services. FICEMS will assist EMS and 911 systems by developing EMS and 911 guidance or frameworks for HIPAA and similar policies. The focus is policies that impact modern and emerging technologies and best practices for EMS. Topics could include, for example, bidirectional data exchange, drones, body cam policy for EMS personnel, HIPAA policies for recording patient information in transit, privacy, and others that are emerging. Draft sample policies or guidance documents can be made available for EMS practitioners and 911 agencies who can then determine how, when, and if to apply to their service.

**Objective 4.5: Integrate Federal (including military) and SLTT best practices and lessons learned with Federal guidance on EMS and 911 systems trauma care, including for large-scale trauma events**

FICEMS will work with its Federal stakeholders to develop methods for integrating lessons learned from military combat experiences, large-scale Federal response to disasters and catastrophic events, and other mass casualty incidents into EMS and 911 best practices. There are both operational and clinical lessons learned that can be leveraged to inform and improve Federal and civilian delivery of emergency medicine. Training and incident exercises can also benefit from the experiences gained across Federal agencies responding to trauma events. FICEMS will help bring information to the wider EMS and 911 community by identifying and increasing awareness of major incident studies (e.g., the National Academies of Sciences, Engineering, and Medicine *A National Trauma Care System: Integrating Military and Civilian Trauma Systems to Achieve Zero Preventable Deaths After Injury* report<sup>10</sup>) and by integrating lessons learned into SLTT best practices.

**Objective 4.6: Address the challenges of emergency care in areas where there are special concerns posed by geography or in which access may be limited**

Geographic limitations have long created challenges for EMS delivery, especially in rural areas where emergency responders may have to travel farther or over difficult terrain. In addition to geography, other resources may be limited, such as trained clinicians and access to medical facilities. Partnering with community healthcare providers is often critical in rural areas. The availability of specialized training for rural EMS practitioners may also be a challenge. Rural areas tend to have a higher proportion of volunteer EMS personnel and a lower proportion of advanced education degrees, whereas urban areas have more career personnel and more advanced degrees. This can impact both access to emergency care as well as the training

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<sup>9</sup> Emergency Triage, Treatment and Transport reimbursement model is a watershed moment in modern EMS. <https://www.ems1.com/ems-products/billing-administration/articles/emergency-triage-treatment-and-transport-reimbursement-model-is-a-watershed-moment-in-modern-ems-M5TaUxoW3HTosDQO/>

<sup>10</sup> A National Trauma Care System: Integrating Military and Civilian Trauma Systems to Achieve Zero Preventable Deaths After Injury. <https://www.nap.edu/catalog/23511/a-national-trauma-care-system-integrating-military-and-civilian-trauma>

and education of practitioners. A draft tactical plan for rural and frontier EMS published in 2019 identified a number of areas for improvement, including assessment of available services, medical oversight, public access, communication systems, and prevention through community paramedicine.<sup>11</sup> FICEMS will help to identify and address the challenges of emergency care in areas with geographic or other limitations, working to ensure access to care as well as quality of care.

## **Goal 5. An EMS and 911 culture in which safety considerations for patients, practitioners, and the community permeate the full spectrum of activities**

EMS and 911 systems have made significant improvements in the past several years to develop and adopt guidelines that emphasize the safety of all people in its operations. However, EMS and 911 systems across the Nation still have room to improve further. FICEMS will continue to promote an EMS and 911 culture of safety that maintains ongoing efforts to improve safe practices yet also addresses emerging areas of safety for patients, EMS and 911 personnel, other healthcare practitioners, and the public. FICEMS will also promote safe and effective EMS systems that focus on interventions that have demonstrated benefit and prevent further injury and illness to all people, while avoiding those that are ineffective or harmful.

### **Objective 5.1: Promote the reporting, measurement, prevention and mitigation of occupational injuries, deaths, and exposures to serious infectious illnesses in the EMS workforce**

EMS personnel are at constant risk for illness, injury, and death. Minimizing that risk is at the forefront of EMS research and quality improvement. FICEMS will continue to work with its Federal partners to address ongoing and emerging risks that affect the safety of EMS practitioners, to aid in their preparedness and to enhance practices to respond to increasingly dynamic situations. Prominent topics for EMS provider risk and wellness include behavioral health, fatigue, pandemics, ergonomic and assault related physical injury, active shooter and civil unrest incidents, and vehicle and roadway safety. FICEMS will promote the study and monitoring of these and other topics as well as the development of associated guidelines and best practices.

### **Objective 5.2: Evaluate factors within EMS practices that contribute to medical errors or threaten patient safety**

The EMS operating environment is constantly changing. New risks and challenges emerge frequently. With the advent of increased data collection across EMS operations, opportunities arise to better understand factors that significantly affect patient safety. FICEMS will identify and review important research available that highlights risk factors in EMS practices negatively affecting patient safety, such as EMS equipment safety, vehicle safety, and practitioner fatigue. Work-related fatigue affects more than half of EMS practitioners, which in turn affects the safety of EMS operations. FICEMS will work with its Federal and non-Federal partners to promote the development of awareness and mitigation products and programs regarding such problematic risk factors, based on relevant research (e.g., NHTSA *Fatigue in EMS Systems*<sup>12</sup>, National EMS Safety Council *Guide for Developing an EMS Agency Safety Program*<sup>13</sup>).

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<sup>11</sup> Rural and Frontier Emergency Medical Services: Tactical 3-Year Plan. <https://nosorh.org/wp-content/uploads/2019/01/1-24-18-Draft-4.3-for-Public-Comment-.pdf>

<sup>12</sup> Fatigue in EMS Systems. [https://www.ems.gov/pdf/safety/NHTSA\\_Fatigue\\_in\\_EMS\\_Systems\\_Aug\\_2019.pdf](https://www.ems.gov/pdf/safety/NHTSA_Fatigue_in_EMS_Systems_Aug_2019.pdf)

<sup>13</sup> Guide for Developing an EMS Agency Safety Program. <http://www.naemt.org/docs/default-source/ems-health-and-safety-documents/nemssc/ems-safety-program-guide-10-11-17.pdf>

### **Objective 5.3: Support the development and use of anonymous reporting systems to record and evaluate medical errors, adverse events, and “near misses”**

EMS practitioners work in a strenuous and high-risk environment with demand for expediency and accuracy and the potential for dire consequences. While other high-risk, high-consequence professions and industries have established stringent reporting policies and procedures on safety related events, there is comparatively minimal research and reporting of such events in EMS. A National Association of EMS Physicians study in 2018 revealed that major barriers to self-reporting adverse events included fear of punishment, suspension, termination, and investigation.<sup>14</sup> Increased anonymous reporting of medical errors, adverse events, and “near misses” would alleviate such fears, promote accountability, and identify areas for improvement in EMS operations. FICEMS will coordinate among its partners the promotion of existing and potential anonymous reporting methods for EMS that could lead to improvements in EMS operations.

### **Objective 5.4: Evaluate FICEMS role in supporting implementation of the *Strategy for a National EMS Culture of Safety***

NHTSA, the HHS Health Resources and Services Administration, and the American College of Emergency Physicians released the *Strategy for a National EMS Culture of Safety* in 2013.<sup>15</sup> The landmark strategy was developed to guide EMS leaders and organizations in developing of a culture of safety in which safety is a core value integrated into every aspect of EMS. Though a lot of work has been done since then to promote an EMS culture of safety, gaps and challenges persist in realizing the 2013 strategy. The development and publication of *EMS Agenda 2050* carried the work further and highlighted the vision of EMS operations based on the best evidence to deliver the most effective care coupled with a vigilant focus on safety for all people. Work remains to be done to reach that vision. FICEMS will review current efforts to implement the *Strategy for a National EMS Culture of Safety* and identify where it can best support its partners in meeting the vision of the strategy and related aspects of *EMS Agenda 2050*.

### **Objective 5.5: Promote the use of technology, training, and equipment known to enhance the safety of EMS practitioners**

Innovations continue to enhance how EMS practitioners conduct their work to deliver the right care, at the right place, and at the right time for their patients. Advances in EMS operations can also improve the safety of EMS practitioners. Many different occupational hazards threaten EMS practitioners, including exposure to infectious diseases and harmful substances, lifting and moving patients and equipment, and conducting emergency ground and air transport of patients. In 2017, there were over 21,000 injuries and illnesses among EMS practitioners that were treated in hospital emergency departments across the Nation.<sup>16</sup> FICEMS will promote the awareness and use of technologies and practices demonstrated to enhance EMS practitioners’ safety. Examples include the use of unmanned aircraft systems to deliver specialized equipment or medication, advanced personal protective equipment, and telemedicine. FICEMS will also coordinate with its partners to support research, education, training, and standards development regarding effective technologies and practices enhancing EMS practitioner safety.

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<sup>14</sup> Barriers to Self-Reporting Patient Safety Incidents by Paramedics. <https://pubmed.ncbi.nlm.nih.gov/29787325/>

<sup>15</sup> *Strategy for a National EMS Culture of Safety*. <https://www.ems.gov/pdf/Strategy-for-a-National-EMS-Culture-of-Safety-10-03-13.pdf>

<sup>16</sup> Emergency Medical Services Workers Injury Data. <https://www.cdc.gov/niosh/topics/ems/>

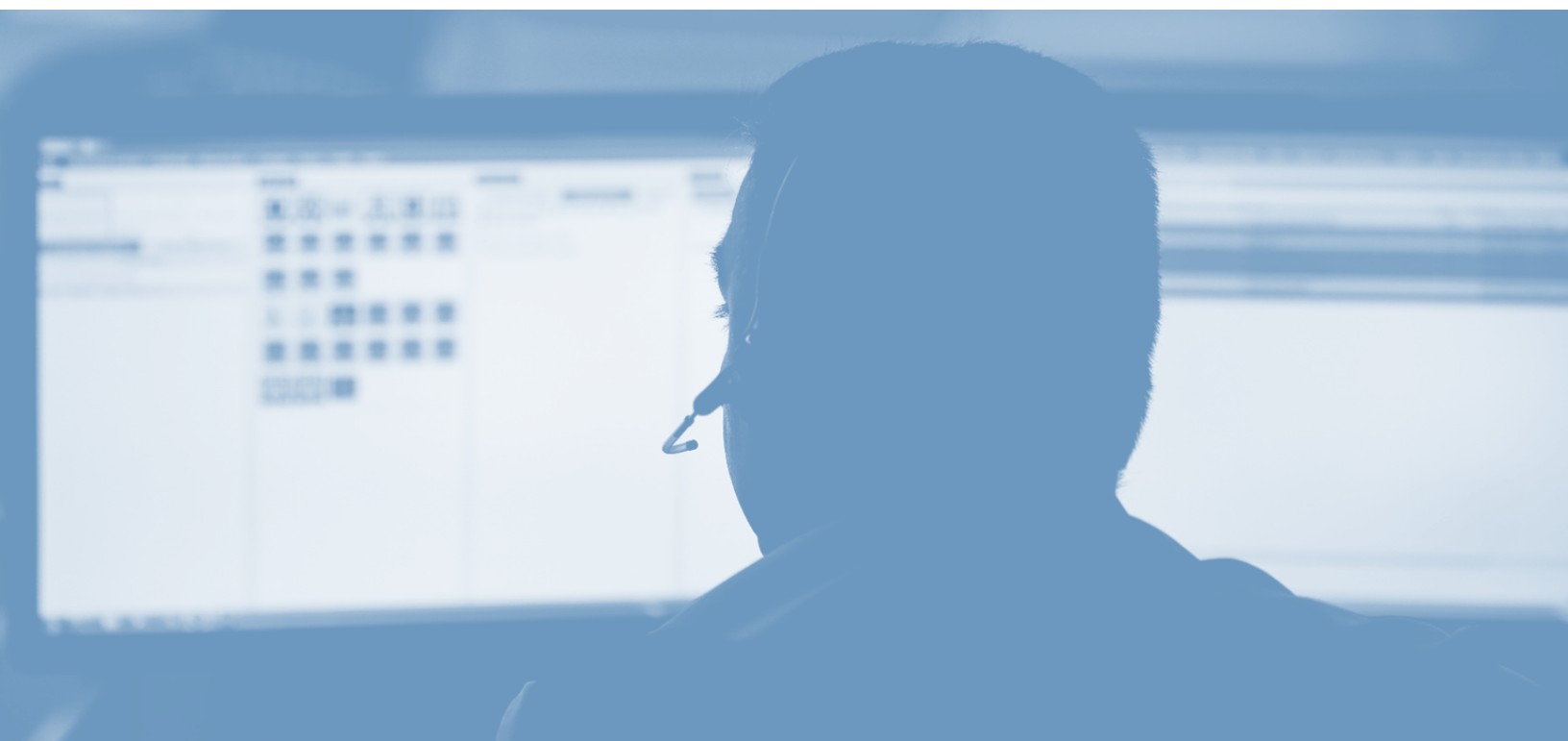


## Goal 6. Uniform, credentialed EMS and 911 workforce with the education, skills, and competency to keep pace with evolving healthcare needs

EMS practitioners remain focused on achieving their primary mission requirements to provide emergency medical care, in a variety of hazards, in a manner that prioritizes safety for all people. However, delivering on this mission is influenced by internal and external factors, necessitating change and evolution, as the systems' needs and requirements fluctuate around emerging issues and changing operating environments and practices. Relevant factors include changes in the EMS profession, threats to the public and EMS practitioners (e.g., natural disasters, drug abuse crises, diseases and pandemics, chemical hazard exposure, fatigue and behavioral health issues), technological and data capabilities, and workforce shortages. To adequately meet the needs of the people they are called to help, EMS practitioners need up-to-date education and training, including for advances in medical techniques and practices, emerging threats to the public and practitioners, new technology and data solutions, relevant standards of practice, and streamlined, adaptable licensing and credentialing. 911 agencies also require updated education and training to incorporate new effective technologies and protocols, and to better integrate with EMS and the overall healthcare community. FICEMS will continue to support the development and coordination of valuable EMS and 911 credentialing, education, and training.

### Objective 6.1: Promote implementation of the *EMS Education Agenda for the Future* to encourage more uniform EMS education, national certification, and SLTT licensing

NHTSA published the original *EMS Education Agenda for the Future* in 2000 to spur the development of a system to support the education, certification and licensure of entry-level EMS personnel that facilitates national consistency.<sup>17</sup> NEMSAC provided an update to the *Education Agenda* in 2014. Implementation of the



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<sup>17</sup> EMS Education Agenda for the Future. [https://www.ems.gov/pdf/education/EMS-Education-for-the-Future-A-Systems-Approach/EMS\\_Education\\_Agenda.pdf](https://www.ems.gov/pdf/education/EMS-Education-for-the-Future-A-Systems-Approach/EMS_Education_Agenda.pdf)

agenda led to NHTSA's development of *EMS Agenda 2050* and the 2019 *National EMS Scope of Practice Model*.<sup>18</sup> Though progress has been made in implementing the vision of the *Education Agenda*, a refocusing of Federal efforts to develop more uniform EMS education, national certification, and SLTT licensing across the Nation would be prudent. FICEMS will evaluate such efforts and promote the use of the *National EMS Scope of Practice Model* to guide ongoing efforts.

### **Objective 6.2: Support SLTT efforts to enhance legal recognition and reciprocity of EMS practitioners across jurisdictions**

States regulate and administer licensing for EMS practitioners to verify competency and ensure accountability for EMS practices in patient care. Variability in licensure requirements from state to state for EMS practitioners has unnecessarily complicated the availability of the EMS workforce to work across state boundaries. Many EMS practitioners have maintained multiple licenses to retain legal recognition to perform EMS duties in multiple states. The Recognition of Emergency Medical Services Personnel Licensure Interstate Compact (REPLICA) was created to facilitate the day-to-day movement of EMS practitioners across state boundaries and direct state EMS offices to afford immediate legal recognition to EMS personnel licensed in any member state.<sup>19</sup> FICEMS will continue to support the expansion of REPLICA, as the EMS CompAct, to include more states.

### **Objective 6.3: Support programs and mechanisms to facilitate the transition of military EMS practitioners to civilian practice**

Military medical personnel have trained extensively to perform advanced emergency medical procedures and effectively address trauma under harsh conditions and as a result are well-qualified to perform such duties in a civilian EMS environment. Tens of thousands of military and other uniformed service men and women with medical training can fill a large EMS employment demand and bring depth and breadth of experience to crisis situations. Though there is broad support for the transition of military medical personnel to civilian EMS practice, approaches to aid that transition vary across states. Commonalities in education, training, and certification can help streamline such a process, as many military medical personnel are required to maintain certification from the National Registry of Emergency Medical Technicians (NREMT) for their positions. FICEMS will evaluate current efforts to facilitate the transition and promote the adoption and expansion of effective programs and mechanisms. FICEMS will leverage the *National EMS Scope of Practice Model* and *A National Trauma Care System: Integrating Military and Civilian Trauma Systems to Achieve Zero Preventable Deaths After Injury*<sup>20</sup> to garner support among its partners.

### **Objective 6.4: Promote the implementation of the *EMS Workforce Agenda for the Future* to encourage data-driven EMS workforce planning**

The *EMS Workforce Agenda for the Future* was developed by NHTSA in 2011 as a call to action for EMS systems to "have a sufficient number of well educated, adequately prepared, and appropriately credentialed EMS workers who are valued, well compensated, healthy, and safe."<sup>21</sup> This ambitious vision led to the development of EMS workforce guidelines for state EMS offices by NASEMSO in 2014 as well as *EMS Agenda 2050*.

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<sup>18</sup> National EMS Scope of Practice Model. [https://www.ems.gov/pdf/National\\_EMS\\_Scope\\_of\\_Practice\\_Model\\_2019.pdf](https://www.ems.gov/pdf/National_EMS_Scope_of_Practice_Model_2019.pdf)

<sup>19</sup> REPLICA. <https://www.emscompact.gov/compact-information/replica-model-legislation/>

<sup>20</sup> A National Trauma Care System: Integrating Military and Civilian Trauma Systems to Achieve Zero Preventable Deaths After Injury. <http://nap.edu/23511>

<sup>21</sup> EMS Workforce Agenda for the Future. [https://www.ems.gov/pdf/2011/EMS\\_Workforce\\_Agenda\\_052011.pdf](https://www.ems.gov/pdf/2011/EMS_Workforce_Agenda_052011.pdf)

The components of the *Workforce Agenda*—health, safety, and wellness; education and certification; data and research; and workforce planning and development—remain relevant today and implementation of those tenets is ongoing. FICEMS will evaluate the status of implementing the *Workforce Agenda* and identify and promote areas in which ongoing support and coordination is most needed, including EMS volunteer practitioner recruitment and retention.

## **Goal 7. Federal interagency committee processes, operations, and strategies that enhance FICEMS effectiveness and adaptability**

FICEMS effectiveness is based upon its ability to evolve and modernize as needed to keep pace with changes in the Federal EMS environment. FICEMS will continuously review its processes, operations, and strategies to ensure its agility in the face of an ever-changing EMS environment.

### **Objective 7.1: Develop and execute a process for examining and updating FICEMS membership and TWG structure, identifying opportunities to increase effectiveness**

While FICEMS membership is defined by statute,<sup>22</sup> much has changed in the years since the legislation was first enacted. The role of Federal organizations involved in EMS and 911 systems has grown and expanded, and with it FICEMS involvement and partnerships. In addition, the structure of agencies historically participating with FICEMS has changed, including HHS, DOD, and DHS. Modernization of how Federal agencies respond to disastrous events has evolved and with it the services and groups providing EMS. FICEMS will work across agencies to develop a process to ensure that its membership is dynamic and evolves, while maintaining its mandated directions and sustainability. This includes expansion or identification of new technical working groups and TWG structure as appropriate. For example, the National Park Service within DOI maintains EMS personnel and programs (e.g., Tactical EMS program, EMS partnership with the U.S. Forest Service). Modernization has also brought improved technology changes (e.g., Next Generation 911 and FirstNet), supporting standards for EMS and 911 (e.g., those developed from research contributed by the National Institute of Standards and Technology [NIST]), and new agency partners as a result.

### **Objective 7.2: Develop a FICEMS marketing outreach and communications strategy and an associated review and update process for the strategy**

Communications among Federal agencies and SLTT organizations is one of the vital coordination services that FICEMS provides. FICEMS will develop a marketing communications and outreach plan and strategy that fits today's digital world and enables rapid dissemination of information across the Nation. This will help to ensure that all stakeholders are provided with critical information as it emerges, especially as it impacts our vital EMS and 911 systems and other healthcare providers. The plan will also address the need to promote EMS and 911 systems as services essential to the health and well-being of communities, important contributors to the national economy, and significant sources of savings for the healthcare system. In addition, the plan will help FICEMS conduct outreach to promote itself with non-Federal stakeholders, such as at national conferences, on webinars, through updated FICEMS website content, and through scripted messages to be disseminated by members' communications staff. FICEMS will include a process in the plan for measuring progress and value, as well as methods for periodic update and evaluation.

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<sup>22</sup> Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users.  
<https://www.govinfo.gov/content/pkg/PLAW-109publ59/pdf/PLAW-109publ59.pdf>

### Objective 7.3: Review and update FICEMS processes for interacting with NEMSAC

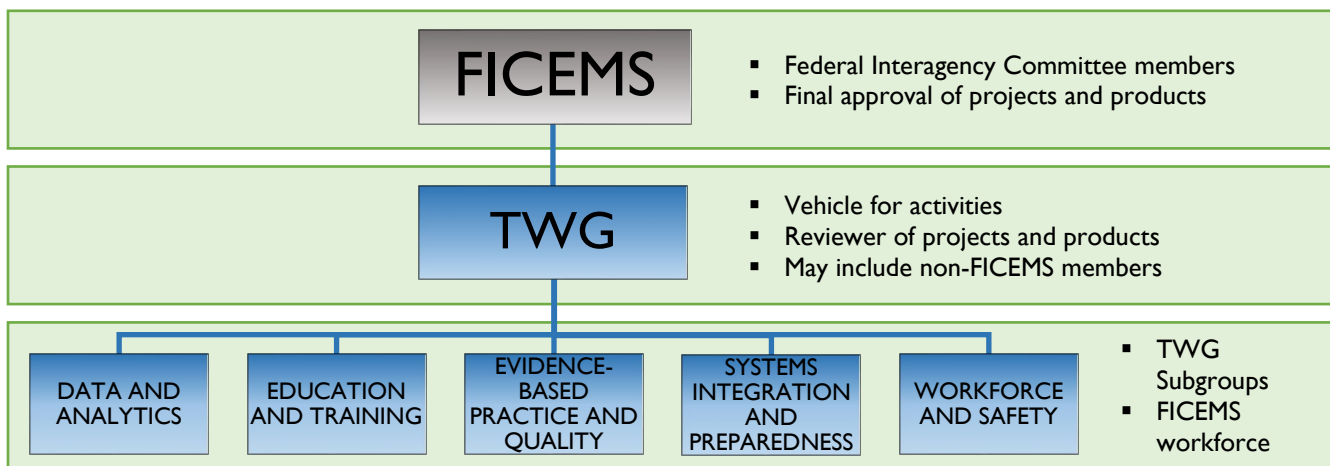
NEMSAC is a nationally recognized, Federal Advisory Committee of EMS representatives and consumers established to provide advice and recommendations regarding EMS to FICEMS and the Secretary of DOT.<sup>23</sup> NEMSAC represents the national non-Federal counterpart to FICEMS in enhancing EMS systems across the Nation. FICEMS will review how it interacts with NEMSAC as a key non-Federal partner to extend FICEMS expertise and guidance throughout EMS and 911 systems. As necessary, FICEMS will update its processes for requesting recommendations from and consulting with NEMSAC on specific topics as well as feedback on important FICEMS products.

### Objective 7.4: Identify FICEMS opportunities for developing and submitting recommendations to Congress

FICEMS reports annually to Congress on its activities and progress. In addition, FICEMS has been active in conducting studies on issues of national importance regarding EMS and 911 systems, methods for improving effectiveness, and needs and gaps that should be addressed. FICEMS will continue to identify and report on such issues and will further assess opportunities to bring these to the attention of Congress. FICEMS will also work with Federal agencies to make recommendations to Congress about how to address challenges and other issues of critical importance to out-of-hospital emergency medical care.

## Implementation

Currently, FICEMS operates under a structure including the TWG and its Subgroups to enact its mission. Activities to carry out FICEMS strategic goals and objectives are assigned to TWG Subgroups.



The TWG represents the means by which FICEMS conducts activities. Collectively, the TWG reviews projects and products developed by TWG Subgroups and submits to FICEMS for final approval. TWG Subgroups allow for subject matter expertise to support and inform FICEMS activities. Implementation of this strategic plan will result in aligned and coordinated Federal support for EMS and 911 systems. The impact of this implementation will be demonstrated by EMS and 911 systems that fully integrate the needs of underserved populations such as children, the elderly, and the geographically isolated.

<sup>23</sup> National EMS Advisory Council. <https://www.ems.gov/nemsac.html>

## TWG Subgroups

FICEMS TWG Subgroups are the workforce conducting the day-to-day efforts of FICEMS to support and advance EMS and 911 systems in the Nation. Five TWG Subgroups support the work of FICEMS in important focus areas, each with direction from FICEMS to address specific goals and objectives in the strategic plan.

The five current TWG Subgroups are:

- **Data and Analytics** – advancement of technology solutions across the EMS data continuum including data standards, acquisition, storage, interoperability, analysis, and reporting
- **Education and Training** – advancement of knowledge, skills, and capabilities of the EMS and 911 community
- **Evidence-Based Practice and Quality** – promotion of evidenced-based treatment, including development and propagation of EBGs and measurement of performance and outcomes
- **Systems Integration and Preparedness** – collaboration and coordination of Federal and SLTT EMS and 911 systems
- **Workforce and Safety** – enhancement of the health and resilience of EMS and 911 personnel and the safety of all people in the out of hospital environment

To effectively implement the goals and objectives in this strategic plan, FICEMS may revise the TWG structure and membership.

## Measuring Progress

FICEMS maintains a visual matrix for responsible, accountable, consulted, and informed (RACI) entities per its activities addressing strategic goals and objectives. A RACI matrix depicts the functions of specific parties or roles in the performance of actions or tasks. Use of a RACI matrix can help ensure that all parties both have input into, and are aware of, their respective duties. For each action, an organization may be assigned one of the positions shown in the table below:

Responsible	Accountable	Consulted	Informed
The role or roles that perform the action required by the task.	The role that is finally answerable for the task.	The role or roles whose inputs are solicited prior to the task.	The role or roles to whom the outcome is communicated following completion.
<b>Who has the action on this activity?</b>	<b>Who is “on the hook” for this activity?</b>	<b>With whom do we have to clear this? What is their input?</b>	<b>Who needs to know about this?</b>

The matrix serves to coordinate and streamline the efforts of involved parties and to promote an atmosphere of accountability. Activities assigned to TWG Subgroups are tracked and monitored using a RACI matrix maintained and updated by each Subgroup. See Appendix C for an example TWG Subgroup RACI matrix. As activities are conducted to implement this strategic plan, FICEMS may revise its processes for measuring progress.



## Appendix A. Abbreviations

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DHS	U.S. Department of Homeland Security
DOD	U.S. Department of Defense
DOI	U.S. Department of the Interior
DOT	U.S. Department of Transportation
EBG	Evidence-based guideline
EMS	Emergency medical services
ET3	Emergency Triage, Treat, and Transport Model
FCC	Federal Communications Commission
FEMA	Federal Emergency Management Agency
FICEMS	Federal Interagency Committee on Emergency Medical Services
HHS	U.S. Department of Health and Human Services
HIE	Health information exchange
HIPAA	Health Insurance Portability and Accountability Act
HSEEP	Homeland Security Exercise and Evaluation Program
IoT	Internet of things
NASEMSO	National Association of State EMS Officials
NEMSAC	National Emergency Medical Services Advisory Council
NEMSIS	National Emergency Medical Services Information System
NEMSQA	National Emergency Medical Services Quality Alliance
NFIRS	National Fire Incident Reporting System
NHTSA	National Highway Traffic Safety Administration
NIMS	National Incident Management System
NIST	National Institute of Standards and Technology
NREMT	National Registry of Emergency Medical Technicians
RACI	Responsible Accountable Consulted Informed
REPLICA	Recognition of Emergency Medical Services Personnel Licensure Interstate CompAct
SAFETEA-LU	Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users
SLTT	State, local, tribal, and territorial
TWG	Technical Working Group

## Appendix B. Members and Partners

The following is a table of FICEMS member agencies and partner agencies and organizations.

FICEMS Members	
DHS	Office of the Chief Medical Officer
	U.S. Fire Administration
DOD	Office of the Assistant Secretary of Defense for Health Affairs (OASD HA)
DOT	NHTSA Office of EMS
HHS	Office of the Assistant Secretary for Preparedness and Response (ASPR)
	Health Resources and Services Administration (HRSA)
	Centers for Medicare and Medicaid Services (CMS)
	Indian Health Service (IHS)
FCC	Centers for Disease Control and Prevention (CDC)
	Public Safety and Homeland Security Bureau
State EMS Director	Florida Department of Health Bureau of Emergency Medical Services System
FICEMS Partners	
Non-Member Federal Agencies	CDC Office of Public Health Preparedness and Response (OPHPR)
	CDC Division of Strategic National Stockpile (DSNS)
	CDC National Institute for Occupational Safety and Health (NIOSH)
	DHS Science and Technology Directorate
	HRSA Federal Office of Rural Health Policy
	NIST
	U.S. Department of State
	U.S. Forest Service
Non-Federal Partners	U.S. General Services Administration
	U.S. National Park Service
	U.S. Department of Justice
	Air and Surface Transport Nurses Association (ASTNA)
	American Academy of Pediatrics (AAP)
	American Ambulance Association (AAA)
	American College of Emergency Physicians (ACEP)
	American College of Surgeons (ACS)
	Association of Air Medical Services (AAMS)
	Association of Public-Safety Communications Officials – International (APCO International)
Commission on Accreditation for Prehospital Continuing Education (CAPCE)	
Commission on Accreditation of Ambulance Services (CAAS)	
Commission on Accreditation of Medical Transport Systems (CAMTS)	

Non-Federal Partners	Committee on Accreditation of Educational Programs for the EMS Professions (CoAEMSP)
	Emergency Medical Services for Children Innovation and Improvement Center (EIIIC)
	International Academies of Emergency Dispatch (IAED)
	International Association of EMS Chiefs (IAEMSC)
	International Association of EMTs and Paramedics (IAEP)
	International Association of Fire Chiefs (IAFC)
	International Association of Fire Fighters (IAFF)
	International Association of Flight and Critical Care Paramedics (IAFCCP)
	National Association of Emergency Medical Technicians (NAEMT)
	National Association of EMS Educators (NAEMSE)
	National Association of EMS Physicians (NAEMSP)
	National Association of State EMS Officials (NASEMSO)
	National Emergency Number Association (NENA)
	National EMS Advisory Council (NEMSAC)
	National EMS Management Association (NEMSMA)
	National EMS Management Association (NEMSMA)
	National EMS Memorial Foundation (NEMSMF)
	National EMS Pilots Association (NEMSPA)
	National EMS Quality Alliance (NEMSQA)
	National EMS Safety Council (NEMSSC)
National Native American EMS Association (NNAEMSA)	
National Registry of Emergency Medical Technicians (NREMT)	

## Appendix C. Example RACI Matrix

The following is an example RACI matrix for one strategic goal and one objective.

<b>Goal 2:</b> Data-driven, evidence-based, and standardized EMS and 911 systems that help to improve the quality of out-of-hospital patient care				
<b>Objective 2.1:</b> Support the development, implementation, and evaluation of evidence-based guidelines (EBGs) according to the National Prehospital EBG Model Process				
<b>Task (Examples)</b>	<b>Responsible</b>	<b>Accountable</b>	<b>Consulted</b>	<b>Informed</b>
1. Brief FICEMS on the status of EBG development and implementation. (e.g., EBG Model Guidelines and implementation, National Strategy, and Publications)	Evidence-Based Practice and Quality Subgroup	Evidence-Based Practice and Quality Co-Chair	NHTSA HRSA AAA	NHTSA FICEMS Members TWG
	<b>Status Update</b>			
	<ul style="list-style-type: none"> <li>• NHTSA and HRSA funded revision of...</li> <li>• HRSA partnered with AAA to develop...</li> </ul>			
2. Identify mechanisms to disseminate EBGs to stakeholders	Evidence-Based Practice and Quality Subgroup	Evidence-Based Practice and Quality Co-Chair	NHTSA HRSA IHS AAP	NHTSA FICEMS Members TWG
	<b>Status Update</b>			
	<ul style="list-style-type: none"> <li>• HRSA partnered with IHS and AAP to continue site visits to...</li> <li>• NHTSA developed a webinar series to...</li> </ul>			
3. Support the development of EBGs on emerging topics, including...	Evidence-Based Practice and Quality Subgroup	Evidence-Based Practice and Quality Co-Chair	NHTSA HRSA NIOSH	NHTSA FICEMS Members TWG
	<b>Status Update</b>			
	<ul style="list-style-type: none"> <li>• HRSA conducted review of existing EBGs on...</li> <li>• NHTSA and HRSA partnered with NIOSH to develop...</li> </ul>			

## Appendix D. Mapping Strategic Goals

The following table highlights how FICEMS strategic goals align with FICEMS purposes defined in SAFETEA-LU and the six guiding principles of *EMS Agenda 2050: A People-Centered Vision for the Future of Emergency Medical Services*.

Goal 1	Coordinated and integrated Federal, state, local, tribal, and territorial EMS and 911 systems that provide safe and efficient high-quality patient care	<b>A</b> <b>B</b> C D E F 1 <b>2</b> 3 <b>4</b> <b>5</b> 6
Goal 2	Data-driven, evidence-based, and standardized EMS and 911 systems that help to improve the quality of out-of-hospital patient care	A B <b>C</b> D E <b>F</b> <b>1</b> <b>2</b> <b>3</b> 4 5 <b>6</b>
Goal 3	EMS and 911 systems effectively integrated into Federal, state, local, tribal, and territorial preparedness planning, response, and recovery	<b>A</b> B C D <b>E</b> F 1 <b>2</b> <b>3</b> <b>4</b> 5 6
Goal 4	EMS and 911 systems that are people-centered, sustainable, forward-looking, and integrated with the overall healthcare system	A B <b>C</b> <b>D</b> E F 1 <b>2</b> 3 <b>4</b> <b>5</b> <b>6</b>
Goal 5	An EMS and 911 culture in which safety considerations for patients, practitioners, and the community permeate the full spectrum of activities	A <b>B</b> C D <b>E</b> <b>F</b> <b>1</b> 2 <b>3</b> <b>4</b> 5 6
Goal 6	Uniform, credentialed EMS and 911 workforce with the education, skills, and competency to keep pace with evolving healthcare needs	A <b>B</b> <b>C</b> D E <b>F</b> 1 2 3 <b>4</b> 5 <b>6</b>
Goal 7	Federal interagency committee processes, operations, and strategies that enhance FICEMS effectiveness and adaptability	<b>A</b> B C <b>D</b> E <b>F</b> 1 <b>2</b> 3 <b>4</b> 5 <b>6</b>

### FICEMS Statutory Purposes

- A. Ensure coordination among Federal agencies involved with EMS and 911 systems
- B. Identify EMS and 911 systems needs
- C. Recommend new or expanded programs
- D. Identify ways to streamline Federal support
- E. Assist EMS and 911 systems in setting priorities
- F. Advise, consult, and make recommendations on implementation of coordinated EMS and 911 systems

### EMS Agenda 2050 Guiding Principles

1. Inherently Safe and Effective
2. Integrated and Seamless
3. Reliable and Prepared
4. Socially Equitable
5. Sustainable and Efficient
6. Adaptable and Innovative