

**Congressional Report on Support for Emergency
Medical Services Provided Through the
Department of Homeland Security's Office of
Grants and Training**

Prepared in Accordance with Conference Report 109-699

US Department of Homeland Security
Preparedness Directorate
Office of Grants and Training
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1. LEGISLATIVE REQUIREMENT

Under the provisions of the Conference Report (H. Rep. 109-699) accompanying the Department of Homeland Security Fiscal Year 2007 Appropriations Act, (Pub. L. 109-295), the Department of Homeland Security is directed to submit a report to the Committees on Appropriations of the Senate and House of Representatives of the United States on the use of Homeland Security Grant Program (HSGP) and Assistance to Firefighter Grant (AFG) funds for Emergency Medical Services (EMS). Page 157 of the Conference Report states:

“The Conferees remain concerned with the lack of first responder grant funding being provided to the Emergency Medical Services (EMS) community and direct G&T to require in its grant guidance that State and local governments include EMS representatives in planning committees as an equal partner and to facilitate a nationwide EMS needs assessment. In addition, no later than January 23, 2007, the Department shall report to the Committees on Appropriations, the House Committee on Homeland Security, and the Senate Committee on Homeland Security and Governmental Affairs, on the use of Homeland Security Grant Program funds and Firefighter Assistance Grant funds for EMS.”

This report, entitled “Support for the Emergency Medical Service Provided through the Department of Homeland Security’s Office of Grants and Training,” is submitted in response to this paragraph of the Conference Report.

2. EXECUTIVE SUMMARY

This report, “Support for the Emergency Medical Service Provided through the Department of Homeland Security’s Office of Grants and Training,” has been prepared by the Department of Homeland Security’s Office of Grants and Training (G&T). The report describes past efforts and support that G&T has and continues to provide to emergency responders, including the Emergency Medical Services (EMS) community. For the purposes of this report, G&T has focused on Fiscal Year (FY) 2005 funding under three specific grant programs. These are the FY 2005 Homeland Security Grant Program (HSGP), the FY 2005 Urban Areas Security Initiative (UASI), and the Assistance to Firefighters Grant (AFG) Program.

G&T’s mission is to strengthen national preparedness by enhancing the capacity of States, Territories, local agencies, Tribal governments, and the private sector to prevent, protect against, respond to, and recover from incidents of terrorism, natural disasters, and other emergencies through coordinated training, equipment acquisition, technical assistance, and support for State and local exercises.

G&T fulfills this mission by working directly with officials and responders from States, Territories, and local jurisdictions and by conducting assessments of needs and capabilities to guide DHS programs and assistance. G&T grant funds can be used to enhance emergency responder capabilities, including EMS, in accordance with the goals and objectives identified in the state or urban area’s homeland security strategy. Additionally, fire department-based EMS providers have been, and continue to be, eligible for assistance under the AFG Program.

This report draws upon the latest grant funding data available, the June 2006 Biannual Strategy Implementation Report (BSIR), to outline the support provided to EMS through AFG and HSGP (including UASI). The June 2006 BSIR does not encompass FY 2006 grant data since FY 2006 HSGP grants funds were awarded in July 2006. Therefore, given that FY 2006 grant funding data for HSGP (including UASI) was not available for this report, G&T utilized FY 2005 funding data. In FY 2005, UASI was included in HSGP; however, for the purposes of this report, HSGP and UASI figures are separate.

Given that the AFG program provides direct awards, funding information is more readily available. As such, data provided under this report’s AFG section covers multiple years.

Summary Funding Table: EMS Support Under HSGP, UASI, and AFG (in Millions)

	FY02	FY03	FY04	FY05	Total
Homeland Security Grant Program (excluding UASI)					
Eligible funding			\$2,206.9	\$1,664.1	\$3,871.0
EMS Total			\$86.0	\$50.2	\$152.6
Urban Area Security Initiative					
Eligible funding			\$720.7	\$854.7	\$1,575.4
EMS Total			\$23.2	\$12.1	\$42.7
Assistance to Firefighter Grants					
Eligible funding	\$336.5	\$707.2	\$745.6	\$650.0	\$2,439.3
EMS Total	\$3.1	\$4.6	\$73.3	\$63.6	\$144.6
DHS total eligible funding	\$336.5	\$707.2	\$3,673.2	\$3,168.8	\$7,885.7
EMS Total	\$3.1	\$4.6	\$206.3	\$125.9	\$339.9

3A. FY 2005 HOMELAND SECURITY GRANT PROGRAM

Overview:

The FY 2005 Homeland Security Grant Program (HSGP) integrated the State Homeland Security Program (SHSP), the Urban Areas Security Initiative (UASI)¹, the Law Enforcement Terrorism Prevention Program (LETPP), the Citizen Corps Program (CCP), the Emergency Management Performance Grants (EMPG), and the Metropolitan Medical Response System (MMRS) Program Grants into a single application kit. Funding from this combined program significantly enhanced the ability of states, territories, urban areas, and local agencies to prevent, deter, respond to, and recover from threats and incidents of terrorism. The Governor of each State designated a State Administrative Agency (SAA) to apply for and administer the funds under HSGP. The SAA was the only agency eligible to apply for HSGP funds and was responsible for obligating and sub-awarding HSGP funds to local units of government and other designated recipients. For information regarding the Urban Area Security Initiative Program, please reference section 3B of this report.

EMS Eligibility

Funds from the FY 2005 HSGP could be used to enhance first responder capabilities in numerous disciplines, including EMS, at the state and local levels of government in accordance with the goals and objectives identified in the state’s homeland security strategy (formerly known as the state domestic preparedness strategy).

¹ Although the UASI program is a component of the overall HSGP, UASI support for EMS is addressed separately in section 3B of this report.

Any EMS provider that was part of the state's prevention, response, and recovery planning was eligible to receive funding. However, EMS can be owned, operated, and based within different public sector agencies, or provided by private contractors. This fact made examination of individual disciplines very difficult. While no universal definition of "emergency medical service provider" exists, G&T took steps to address standardization in reporting. Beginning in FY 2004, states were required to report on the amount of funding applied to both fire-based and non fire-based EMS.

Grant Awards

To ensure that the expenditure of grant funds supported each state's homeland security strategy, G&T significantly enhanced the reporting requirements associated with the FY 2005 HSGP. Rather than being required to provide detailed budget worksheets, grantees were instead required to submit an Initial Strategy Implementation Plan (ISIP) no later than 60 days after the grant award date. The ISIP provided a complete accounting of how the state complied with the requirement to pass through 80 percent of all funds to local jurisdictions, and also demonstrated how planned expenditure of grant funds at both the local and state levels supported the goals and objectives outlined in the state's homeland security strategy. This was accomplished through the specific identification of projects to be undertaken by each sub-grantee and by the state with funds provided during the grant award period. Completion of the ISIP required that states work closely with local jurisdictions to ensure that local and state expenditures were synchronized with the goals and objectives identified in the homeland security strategy.

All fifty-six states and territories received awards through the FY 2005 HSGP, totaling \$1.66 billion. From the June 2006 BSIR information G&T has received to date, more than \$16 million was used to benefit fire-based EMS and \$33 million for non fire-based EMS. The average amount for fire-based EMS was \$347,910 and for non fire-based \$697,879. The average percentage of funding by state benefiting fire-based EMS was 0.7%, with non fire-based EMS average of 1.4%.

Summary Funding Table: HSGP Support to EMS

Total HSGP Given to States (w/o UASI):		\$1,664,106,371
Total EMS to States (w/o UASI):		\$ 50,198,927
<u>I. EMS (Fire-based)</u>		
Total to fire-based EMS:		\$ 16,699,704
Number of States with no data:	8	
Number of States that gave \$0:	0	
Number of States that did give \$:	48	
Of States that did give money:		
Average Amount:		\$ 347,910.50
Average Percentage of Grant:		0.7%
<u>II. EMS (Non fire-based)</u>		
Total to non fire-based EMS:		\$ 33,499,223
Number of States with no data:	8	
Number of States that gave \$0:	0	
Number of States that did give \$:	48	
Of States that did give money:		
Average Amount:		\$ 697,879.65
Average Percentage of Grant:		1.4%
<i>*States are not required to provide funding to any specific discipline</i>		
<i>**All data comes from the Office of Grants and Training June 2006 BSIR**</i>		

3B. FY 2005 URBAN AREAS SECURITY INITIATIVE

Overview:

The FY 2005 UASI program provided financial assistance to address the unique planning, equipment, training, and exercise needs of high-threat, high-density urban areas, and to assist these areas in building an enhanced and sustainable capacity to prevent, respond to, and recover from threats or acts of terrorism.

The intent of the UASI program is to create a sustainable national model program to enhance security and overall preparedness to prevent, respond to, and recover from acts of terrorism. States ensured that the identified urban areas took an inclusive regional approach to the development and implementation of the FY 2005 UASI program and involved the core cities, core counties, contiguous jurisdictions, mutual aid partners, port authorities, rail and transit authorities, state agencies, Citizen Corps Council(s), and MMRS steering committees.

The FY 2005 UASI program further provided the opportunity to enhance regional preparedness efforts. Urban areas were encouraged to employ regional approaches to overall preparedness and to adopt regional response structures whenever appropriate to meet the needs identified through the assessments and in the urban area strategy. Furthermore, it was G&T's intent to guide state and urban area security and preparedness efforts toward a project-oriented process to address common, measurable objectives. Security and preparedness officials at all levels sought opportunities to leverage funding from multiple sources whenever possible and to not restrict their activities to federal funding alone. In addition, urban areas should have included citizens in planning, preparedness, training, exercises, and volunteer activities to support emergency responders through the local Citizen Corps Councils.

EMS Eligibility:

Funds from the FY 2005 UASI grant program could be used to enhance first responder capabilities in numerous disciplines, including EMS, in accordance with the goals and objectives identified in the state or urban area's homeland security strategy.

Any EMS provider that was part of the state or urban area's prevention, response, and recovery planning was eligible to receive funding. However, as noted earlier, EMS can be owned, operated, and based within different public sector agencies, or provided by private contractors, making examination of individual disciplines very difficult. No universal definition of "emergency medical service provider" exists so G&T took steps to address standardization in reporting. Within the Grants Reporting Tool (GRT), sub grantees in each state align each of their projects to a solution area. They tie each solution area to a list of pre-defined subcategories and to a discipline. Within the discipline category, we have two EMS categories EMS (Fire-based) and EMS (Non fire-based). This allows us to track which disciplines are the beneficiaries of the funding for any given project. Beginning in FY 2004, states were required to report on the amount of funding applied to both fire-based and non-fire based EMS.

Grant Awards:

To ensure that the expenditure of grant funds supported each state or urban area's homeland security strategy, G&T significantly enhanced the reporting requirements associated with the FY 2005 UASI grant program. Rather than being required to provide detailed budget worksheets, grantees were instead required to submit an Initial Strategy Implementation Plan (ISIP) no later than 60 days after the grant award date. The ISIP provided a complete accounting of how the state complied with the requirement to pass through 80 percent of all funds to the designated urban areas, and also demonstrated how the planned expenditure of grant funds at both the urban area and state levels supports the goals and objectives outlined in the state or urban area's Homeland Security Strategy (HSS). This was accomplished through the specific identification of projects to be undertaken by the urban area and by the state with funds provided during the grant award period. Completion of the ISIP required that states work closely with local jurisdictions to ensure that local and state expenditures were synchronized with the goals and objectives identified in the homeland security strategy.

Fifty urban areas and thirty transit agencies received funding via grant awards to 28 states through the FY 2005 UASI program, totaling \$854.7 million. From the June 2006 BSIR information G&T has received to date, \$8.6 million was used to benefit fire-based EMS and \$3.5 million for non fire-based EMS. The average amount for fire-based EMS was \$720,380 and for non fire-based \$287,740. The average percentage for fire-based EMS was 6.0 %. The average percentage benefiting non fire-based EMS was 2.4 %.

Summary Funding Table: UASI Support to EMS

Total UASI Given to 28 States:		\$ 854,656,750
Total EMS to States:		\$ 12,097,452
<u>I. EMS (Fire-based)</u>		
Total to fire-based EMS:		\$ 8,644,566
Number of States with no data:	2	
Number of States that gave \$0:	14*	
Number of States that did give \$:	12	
Of States that did give money:		
Average Amount:		\$ 720,380.50
Average Percentage of Grant:		6.0%
<u>II. EMS (Non fire-based)</u>		
Total to non fire-based EMS:		\$3,452,886
Number of States with no data:	2	
Number of States that gave \$0:	14	
Number of States that did give \$:	12	
Of States that did give money:		
Average Amount:		\$287,740.50
Average Percentage of Grant:		2.4%
<i>*States are not required to provide funding to any specific discipline</i>		
<i>**All data comes from the Office of Grants and Training June 2006 BSIR**</i>		

3C. ASSISTANCE TO FIREFIGHTERS GRANT PROGRAM

Overview:

The purpose of the Assistance to Firefighters Grant (AFG) Program is to award one-year grants directly to the Nation's fire departments and nonaffiliated emergency medical services (EMS) organizations to enhance their abilities with respect to fire and fire-related hazards. AFG's primary goal is to provide assistance to meet fire departments' and nonaffiliated EMS organizations' firefighting and emergency response needs. This program seeks to support organizations that lack the tools and resources necessary to protect the health and safety of the public and their emergency response personnel with respect to fire and other hazards they may face.

The FY 2003 AFG program consisted of four program areas: Fire Operations and Firefighter Safety, Fire Prevention, Vehicle Acquisition, and Emergency Medical Services (EMS). The AFG program allows applicants to submit one application in one program area per application period. Anecdotal data and discussions lead program staff to conclude that since fire departments were restricted to one program area, very few opted to apply for EMS affiliated equipment or training. Therefore, in FY 2004, the EMS program area was merged into the Fire Operations and Firefighter Safety program area. In FY 2004 the three program areas were Fire Operations and Firefighter Safety, Fire Prevention, and Firefighting Vehicle Acquisition. The result is that fire departments can apply for EMS activities such as training or equipment acquisition along with other operational functions. This change was made because in most fire departments, firefighters have multiple roles, including suppressing fires, performing rescues, providing emergency medical care, etc. Separating the EMS activity into a unique program area created an artificial barrier to EMS requests. This change caused the number of requests for EMS affiliated activities or purchases to increase from 216 in FY 2003 to 2,584 in FY 2004, with the requested funds increasing from \$14,228,070 to \$66,396,623.

EMS Eligibility:

The reauthorization of AFG in FY 2005 required the program to provide grants also to non-affiliated emergency service organizations (i.e., not affiliated with fire departments), which were previously ineligible for the program. In addition, the statute required that, at a minimum, 3.5% of appropriated funds be awarded for EMS purposes, and that not more than 2% of appropriated funds awarded to non-affiliated EMS organizations. EMS activities remained an eligible expense for fire departments in FY 2005.

Historical Grant Awards (FY 2001- FY 2005):

While EMS was not an eligible activity in FY 2001, funding was provided for EMS equipment and training within the Fire Operations and Firefighter Safety program area.

As directed in the FY 2002 conference report language, the program was expanded in FY 2002 to include EMS. In order to draw attention to its inclusion and monitor closely its impacts, EMS was added as a separate program area. As a result, fifty-three out of the 5,347 total awards for FY 2002 were specifically for EMS, totaling \$3,058,861 (0.92%). The average amount

distributed to individual EMS programs was \$57,714. (Please note that some EMS training and equipment may have also been funded in the training and firefighting equipment activities within the Fire Operations and Firefighter Safety program area).

Summary Funding Table: FY 2002 AFG Support to EMS

Total Funding through AFG:	\$336,507,355
Total Given to EMS:	\$ 3,058,861
Of the money given to EMS:	
Average Amount:	\$ 57,714

In FY 2003, the EMS program area was expanded to include wellness/fitness activities for fire-based EMS providers. Of the 20,136 applications received in FY 2003, only 216 (1.0%) of the applicants requested a grant within the EMS program area. There were only 69 EMS awards totaling \$4,560,211 for an average award of \$66,090.

Summary Funding Table: FY 2003 AFG Support to EMS

Total Funding through AFG:	\$707,197,891
Total Given to EMS:	\$ 4,560,211
Of the money given to EMS:	
Average Amount:	\$ 66,090

Following the FY 2003 AFG grand cycle, AFG program staff conducted an informal analysis of the AFG applications and awards for EMS training and equipment. This analysis showed an unusually low degree of interest by applicants in EMS related requests. After further analysis, AFG program staff concluded that the structure of the application and grant guidance was inadvertently causing fire departments to choose between fire operations and EMS. This was due to the fact that “EMS” and “Operations and Firefighter Safety” were listed as separate program areas. This separation caused departments to make a “one or the other choice.”

In order to address this issue and improve program delivery, the AFG Program office removed EMS as one of the four discreet program areas in FY 2004, and incorporated EMS as a component of the activities under the Operations and Firefighter Safety Program area. This change was made in order to give fire departments additional flexibility when choosing which program area to apply for. As such, a fire department could apply for assistance within the Operations and Firefighter Safety program area for its EMS unit, (provided the unit fell organizationally under the auspices of the fire department). Other eligible activities under the Operation and Firefighter Safety program area included training, equipment, personal protective

equipment, wellness and fitness, and modifications to fire stations and facilities. Requests for EMS training and equipment were available under the appropriate activities in this program area. The change resulted in a significant upswing in the number of applications including EMS equipment or training in them, and a similar upswing in EMS associated awards.

Of the 20,366 applications received in FY 2004, 13,370 (65%) of the applicants requested a grant within the Operations and Firefighter Safety program area. There were 7,881 awards made through the FY 2004 appropriation, representing \$685,068,933 in federal share dollars. Of the awards 959 EMS-related awards totaling \$73,397,609, for an average award for EMS of \$76,535.

Summary Funding Table: FY 2004 AFG Support to EMS

Total Funding through AFG:	\$685,068,933
Total Given to EMS:	\$ 73,397,609
Of the money given to EMS:	
Average Amount:	\$ 76,535

In FY 2005, a fire department could apply for assistance within the Operations and Safety program area for its EMS unit. As stated above non-affiliated EMS organizations (not falling under the auspice of a fire department) were also eligible to apply for funding. Eligible activities under the Operation and Safety program area included training, equipment, personal protective equipment, wellness and fitness, and modifications to fire stations and facilities. Requests for EMS training and equipment were available under the appropriate activities in this program area.

Of the 20,972 applications received in FY 2005, 14,158 (67%) of the applicants requested a grant within the Operations and Safety program area. There were 5,966 awards were made for the FY 2005 appropriation, representing \$605,494,711 in federal share dollars. There were 839 EMS-related awards totaling \$63,699,874, for an average award for EMS of \$75,923.

Summary Funding Table: FY 2005 AFG Support to EMS

Total Funding through AFG:	\$605,494,711
Total Given to EMS:	\$ 63,699,874
Of the money given to EMS:	
Average Amount:	\$ 75,923