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House Bill 79  
Ohio House Federalism and Interstate Relations Committee

Chairwoman Roegner Vice Chairman Lipps, Ranking Member Leland and Members of the House Federalism and Interstate Relations Committee, thank you for allowing me to testify in support of House Bill 79, the SWAT and EMT Carry Bill.

As the commander of the Alliance Police Department SRT, I manage and lead the training, logistics and operations of our 18 Officer SWAT Team. Our Team is made up of officers and tactical medical professionals from several local police and EMS agencies, and provides tactical police services in our own and several neighboring jurisdictions. A fully capable SWAT Team, the Alliance SRT is responsible for hostage rescue, barricaded subjects, high-risk search warrant service, dignitary protection and high-risk surveillance operations throughout our areas of responsibility.

Our Team also manages the Alliance Police Training Center, a nationally recognized training resource for SWAT teams, where many Ohio SWAT teams from Federal, State and Local jurisdictions train; and where SWAT officers from around the country come to refine their life saving craft.

At the Alliance Police Department SRT we currently have three tactical medical professionals serving on our team; one physician and two EMT's. All three of these brave and capable operators are volunteers, who donate not only their time, on average over 16 hours per month of training and an average of 5 hours per month for call-outs, but their personal resources in the form of equipment and outside training certifications as well. These dedicated professionals serve alongside our SWAT Officers with unfailing loyalty and courage.

Tactical medical professionals serve an absolutely vital role in SWAT missions, bringing the ability to immediately care for victims, officers and suspects at the site of injury, even if under fire. This immediate care is critically important in maximizing injury survivability. Without an integrated tactical medical capability, SWAT teams would be forced to rely on local EMS services personnel who, while dedicated and brave professionals, do not possess the training, skills or protective equipment to enter the "hot zone" of an incident.

Given the dangerous and often chaotic nature of a SWAT incident, tactical medicine provides its fullest measure of benefit when it is integrated deeply into the SWAT team itself. This allows the necessary emergency medical care to happen at the

soonest possible moment. Achieving this level of integration, however, can prove nearly impossible when the tactical medical professionals are unarmed, because without the ability to defend themselves and their patients, tactical medics must be restricted in their movement to areas that have already been rendered safe by the SWAT Team. This usually results in a situation where tactical medical professionals are “staged” outside of a structure, making their response to the site of injury not only slower, but requires SWAT resources to go to the staging area, meet the medics, escort them to the casualty, and then provide security as the medic stabilizes the casualty. This delay in time of treatment and waste of resources can be a critical failure point in both immediate medical treatment and overall mission accomplishment.

Allowing tactical medical professionals to undergo a vigorous course of firearms training and qualification and to then carry firearms in the course of their duties allows the medic to become truly integrated with the team. The tactical medical professional then becomes a self-sustaining resource for the team, able to fully focus on their critical part of the mission, saving lives.

Authorizing tactical medical professionals to carry concealed weapons while on duty, a critical component of this legislation, enables the medic to participate in all facets of SWAT operations. This is an important element because the nature of SWAT missions is such that having our full medical capability available during low profile operations is absolutely essential to safe and effective mission accomplishment.

Some Ohio SWAT teams have addressed this issue by sending already certified police officers to basic EMT and TCCC / TEMS training. While this solves the issue of fully integrating medics into the team, it has severe limitations in its effectiveness and feasibility on a large scale. The cost (course tuition and materials, officer salary, overtime to backfill the officer’s shift, travel and lodging, etc) is simply an insurmountable hurdle for any but the best funded of agencies to consider as a viable option.

Additionally, at its core, tactical medicine is nothing more than emergency medical care while being shot at. Rapid, efficient and well-developed medical skills are required to perform this task well under stress, and it has been my experience that training currently qualified emergency room doctors, nurses and EMT’s the tactical skills necessary for integration into a SWAT team results in better and more efficient care under fire for the victims we seek to help.

Other teams have approached the problem by sending already certified tactical medical professionals to the Ohio Peace Officer Training Academy (OPOTA) basic course. While this is obviously a great method of integrating medical professionals into the SWAT mission, the allocation of the resources required to exercise this option is fiscally impossible for medium and small sized agencies such as ours. Also, a majority of tactical medical professionals currently serving on teams in Ohio are

volunteers, who serve in this capacity in addition to their normal “day jobs” in the medical field, making the cost and time involved with obtaining an OPOTA certification onerous in the extreme.

HB 79’s provisions to authorize tactical medical professionals to carry weapons with either completion of the OPOTA basic course or after having successfully completing an OPOTA approved firearms training course is a much needed and common sense solution to what has to date been a vexing issue for law enforcement teams who seek to balance maintaining the highest level of service possible for the communities we serve and the resources available to provide that service.

Respectfully Submitted