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HB 444 – Township Omnibus Bill
Proponent Testimony – ORC 4765.43 Ambulance Staffing Revision
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House State and Local Government Committee

Good afternoon Chairman Wiggam, Vice Chair Stephens, Ranking Member Kelly, and members of the House State and Local Government Committee. My name is Paul Webb, and I am a Firefighter/EMT with the Pitchin Fire Department in Springfield, Ohio. I appreciate the opportunity to testify as a proponent of the HB 444, the Township Omnibus Bill. In particular, my testimony will address the portion of the bill that revises ORC 4765.43, the Ohio ambulance staffing statute.

The Pitchin Fire Department is an all-volunteer organization of a dozen members, providing fire suppression, rescue, and emergency medical services to around 1,200 residents in approximately 35 square miles of rural Green Township in Clark County. As an all-volunteer organization, the department depends entirely on the good will of its members to carry out operations. Many times these members, with all the pressures life brings, do not have the availability to attend a full-scale Emergency Medical Technician (EMT) course and instead become certified at the entry-level Emergency Medical Responder (EMR) level. Through the forward-thinking provisions of ORC 4765.43, the department is able to use these EMRs as force-multipliers for the small core of EMTs and Paramedics in order to staff ambulances. This situation is repeated in many locations throughout the state of Ohio, and while it is impossible to determine from EMS data alone how many Ohio departments use EMRs to meet the ambulance staffing requirement it can be assured that it is a non-trivial number. In April 2019 there were 424 agencies in the state of Ohio affiliated with at least one of the 2,060 state-certified Emergency Medical Responders.

My purpose in speaking to you today is to urge correction of the oversight in ORC 4765.43 that allows an EMT/Medic to respond the ambulance to meet an EMR at a scene, but *does not* allow an EMR to respond the ambulance to meet an EMT/Medic at a scene. Allowing the latter can save substantial time getting medical care to the scene when the EMR is much closer to the ambulance station than is the EMT/Medic. This can make all the difference in the world to a person in cardiac arrest, a person having an anaphylactic reaction, or a person bleeding from a serious laceration.

I support HB 444, and thank Representatives Baldrige and Abrams for addressing these issues. I strongly encourage your support as well. Mr. Chairman, thank you for the opportunity to testify before you this afternoon, and I would be happy to answer any questions you or committee members may have.