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The Honorable Nathan Manning, Chair
Senate Local Government, Public Safety, and Veterans Affairs Committee
Ohio Senate
1 Capital Square, 1st Floor
Columbus, OH 43215

RE: HB 444 – Township Omnibus Bill - ORC 4765.43 Ambulance Staffing Revision

Dear Chairman Manning:

My name is Paul Webb, and I am a Firefighter/EMT with the Pitchin Fire Department in Springfield, Ohio. Thank you for allowing me to take a moment of your time to express my support for HB 444, the Township Omnibus Bill, a portion of which clarifies the ORC 4765.43 ambulance staffing requirements with regards to Emergency Medical Responders (formerly E.M.S. First Responders)

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 writing to you today, Mr. Chairman, is to urge the passage of HB 444 to enable correction of a simple oversight in ORC 4765.43. This oversight 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.

Please feel free to reach out to me if you have any questions about my position in this matter.

Most Respectfully,
e\Paul M. Webb II