



**TESTIMONY ON SB 698
PUBLIC SAFETY AUTHORITIES**

Presented to the Senate Veterans Affairs and Emergency Preparedness Committee

By
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2021 CCAP President

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Good afternoon. I am Kevin Boozel, a Butler County commissioner and 2021 president for the County Commissioners Association of Pennsylvania (CCAP). The Association is a non-profit, non-partisan association providing legislative, educational, insurance, research, technology, and similar services on behalf of all of the Commonwealth's 67 counties. I am pleased to be here today to discuss the history of CCAP's involvement in seeking solutions to the emergency medical services crisis in Pennsylvania and note that I am also joined today by a fellow commissioner, Scott Dunn of Fayette County, who will comment further on his local county experiences later in the hearing.

Thank you for the opportunity to participate in this hearing on SB 698, which would allow for the creation of countywide or multi-municipal Public Safety Authorities, including providing fire protection services and emergency medical services (EMS). Forming and participating in an EMS authority is a local decision, and the bill directs the Department of Community and Economic Development to work with relevant stakeholders to develop guidance and assistance for counties to create public safety authorities and contract to provide educational and technical assistance. It is important to highlight that SB 698 simply provides and codifies an option, not a mandate, for counties or municipalities to create Public Safety Authorities that would continue to allow EMS agencies to retain autonomy while finding ways of structuring support and funding that work for their communities. The county cannot simply take over service provision, but will have to work to bring stakeholders together to build buy in and trust to whatever model and solutions are ultimately developed locally.

Before diving into the specifics of the legislation, it is important to note how we got to this point and why counties are engaging in conversations related to EMS. As we are all aware, emergency medical services in Pennsylvania are in crisis, affirmed by findings of multiple studies and most prominently in the 2004 SR 60 report, and reaffirmed in the report of the legislature's SR 6 Commission, released in 2018. The SR 60 report was groundbreaking, with an extensive set of findings and concurrent recommendations on both fire and EMS services. The successor SR 6 Commission, in turn, found that many of the circumstances and conclusions of the SR 60 report remained unchanged, and developed updated findings and recommendations, which are now serving as the basis for legislative activity.

While counties do not have direct responsibility for EMS in Pennsylvania, we recognize that our municipalities have varying capacities to organize, promote or provide emergency services. Emergency medical services in Pennsylvania are a mix of public and private, although mostly public, and of those that are public, most are primarily, if not exclusively volunteer, with some integrated with fire services. Most are organized at the municipal level, but typically covering service territories outside those boundaries, in part because other areas lack service, in part because of differences in certification levels and hence protocols on dispatch, and in part because of backup service response needs when covering for units already out on responses. Issues with service capacity are shared between urban and rural areas, although the basis for those capacity differences may be different. And while professionalism – including training, certification, and equipment – has evolved considerably in tandem with evolution of the health

care industry overall, the resource requirements of the system are increasingly unsustainable.

With that in mind, counties have expressed a need to explore whether they could help address the issues raised in the SR 60 and SR 6 reports, focusing on EMS, and whether other models may be available, either regionally or countywide, in providing those services. In 2019, CCAP developed an EMS Task Force, which I had the honor of co-chairing. The Task Force convened stakeholders including municipalities, state agencies, consultants and others to review the causes and issues and to make findings and recommendations, all in the context of determining whether counties are positioned to play any role in assuring reliable provision of this vital public service. The Task Force also reviewed the study that was performed in Pike County, which had a large impact on our work, research and understanding of the local impacts.

In the broadest context, the Task Force divided its work among specific topic areas, with a set of recommendations for each, including reference to the relevant SR 6 recommendations, the related policy considerations, and a discussion of opportunities for counties to contribute to the solution, including retention and recruitment, reimbursement rates, funding, coverage, service models, risk reduction, EMS Act and regulations, technology support, and training requirements. The full Task Force report, released in November 2019, is available on the CCAP website at www.pacounties.org. Solutions to the EMS crisis has been critical to counties as it directly impacts residents, so much so that it has been a CCAP legislative priority issue for the past two years.

One of the priority recommendations developed by the CCAP EMS Task Force, created in response to a desire by counties to explore where they might support efforts to assure reliable and sustainable emergency services, is to develop statutory authorization for county or multi-municipal authorities that would be capable of countywide or regional service delivery, including paid staffing, optimization of service deployment and service areas and dedicated funding sources. In general, the concept is an option to enable new models for providing EMS by granting significant flexibility on service, structure, funding, and related matters to be able to match local needs and circumstances.

As such, CCAP supports SB 698's clarification that the existing statutory ability to create authorities also extends to emergency management services. There are a number of benefits to this concept, including the ability to aggregate resources. For instance, a single authority can apply for grants on behalf of all participating agencies, rather than forcing multiple entities to compete with one another for limited resources. It could also allow individual agencies and departments to retain their own autonomy rather than engaging in a merger, with the larger authority handling common administrative tasks or serving as a resource for recruitment and training. Further, we realize that funding and resources are one of the significant challenges facing emergency services today, and the authority structure allows for consideration of fee alternatives that would offer additional financial assistance, making it easier for EMS and fire companies to focus on service provision over the constant need for fundraising.

As I suspect you will hear from others, the ability to utilize this model could dramatically change

the EMS provision landscape by not tearing down our already existing providers, but by streamlining resources to ensure companies can remain in business, while more adequately and efficiently serving residents locally. We have heard of countless providers that are struggling to recruit and retain employees, while remaining above water financially. Emergency medical services are critical, life saving services that cannot go away – this crisis is a matter of life and death at the end of the day. While I recognize that some hesitancy to immediately sign on to this concept may exist, I want to continue to stress that SB 698 codifies an option that would have the specific details decided on by the local providers and stakeholder organizations. Counties recognize and respect the need for local input and decision making and believe SB 698 protects that autonomy while more efficiently providing for our residents.

To be clear, counties are not seeking to take over the responsibility for EMS, but rather to offer resources and alternatives and to help with bringing stakeholders to the table to create local solutions. Counties, their municipal leaders and local service providers, in many cases, are already coming together to examine and implement solutions to the crisis that work for their communities and SB 698 offers an opportunity to enhance local collaborative efforts by allowing for operational efficiencies and local decision making that can best serve their residents' needs. We also recognize that the option to create EMS authorities are not a silver bullet to solve this crisis – it is just one tool in the toolbox, and much work remains to be done on the other topic areas in our Task Force report. Senate Bill 698 is a step in the right direction to providing options to local communities and achieves a primary recommendation of the CCAP EMS Task Force.

Thank you for your consideration of these comments. We would be pleased to answer any questions you may have.