July 22, 2024

Mark Hagemann
Director, Office of Safety Systems, Directorate of Standards and Guidance
Occupational Safety and Health Administration
U.S. Department of Labor
Washington, DC

Dear Director Hagemann –

The National Association of Emergency Medical Technicians (NAEMT) appreciates the opportunity to comment on OSHA’s Emergency Response Proposed Rule. NAEMT commends OSHA for embarking on this rulemaking process to update the 1981 Fire Brigade standard and place a vital focus on protecting all emergency responders from a variety of occupational hazards. A collaborative federal focus on EMS safety and health is undoubtedly needed to improve the overall health of the workforce, and lower morbidity, injury, and illness.

Formed in 1975 and over 90,000 members strong, the NAEMT is the only national association representing the professional interests of paramedics, advanced emergency medical technicians, emergency medical technicians, emergency medical responders, and other professionals providing prehospital and out-of-hospital emergent, urgent or preventive medical care. NAEMT members work in all sectors of EMS, including government service agencies, fire departments, hospital-based ambulance services, private companies, industrial and special operations settings, and the military. They also work in hospitals, clinics, and other healthcare settings. NAEMT serves its members by advocating on issues that impact their ability to provide quality patient care, providing high-quality education that improves the knowledge and skills of practitioners, and supporting EMS research and innovation.

Annually, EMS, along with its fire service colleagues, has been identified in the top ten (EMS was #3 in 2021) of all private industries for non-fatal injuries and illnesses. According to the CDC EMS Clinician Injury Data, the profession endured 16,900 injuries in 2020. Research on occupational injuries and Illnesses among paramedics determined that paramedics were four times more likely to experience a work injury and seven times more likely to experience a back injury than the national average for all U.S. workers. Paramedics suffer 2.3 times more transportation injuries than firefighters, 3.6 times higher than the national average. According to the 2020 National EMS Assessment, EMS occupational safety and health programming and reporting is vastly deficient by States:

- 19% of states recommend health and wellness programming for the EMS workforce
- 35% monitor on-the-job EMS deaths
- 21% monitor on-the-job injuries
- 23% monitor on-the-job bloodborne exposures
- 55% monitor EMS vehicle crashes

NAEMT recognizes OSHA’s laborious efforts and well-intended outcomes of the proposed rule to address emergency responders’ safety and health challenges but our organization is gravely concerned about the significant impacts the rule places upon an already under-resourced and stressed EMS infrastructure.
As currently proposed, the rule will likely decimate a workforce already in crisis, creates an unfunded mandate, attempts to aggregate fire and EMS into a singular occupational classification that endures similar challenges, creates additional legal liability and burdensome prudence, and mandates unrealistic timelines for implementation. If enacted as written, the proposed rule will only exacerbate the crisis-level EMS workforce shortages and agency/department shutdowns, leaving U.S. communities insufficient access to essential healthcare response in critical times.

NAEMT recommends that OSHA first address the following core issues around EMS occupational safety and health rather than enact a flawed proposed rule with potentially detrimental, crippling effects across EMS in the United States. Our organization kindly asks that OSHA consider the following areas before enacting any federal rule upon EMS.

**Collaboration with EMS Stakeholders**
NAEMT strongly recommends that OSHA seeks guidance and expertise from national subject matter experts involved in EMS policy and operations, and the national and state EMS associations. For decades, EMS stakeholders have invested a significant amount of time and resources into addressing occupational safety and health. A blueprint of baseline safety and health standards exists throughout these resources and should be considered by OSHA when engaging in rulemaking. NAEMT urges OSHA to demonstrate better engagement with the EMS profession by including a diverse representation of EMS subject matter experts on its National Advisory Committee on Occupational Safety & Health and other distinct emergency response advisory committees.

- **2020 National EMS Assessment** *(EMS Workforce Health and Safety, pgs. 142-147)*
- **Strategy for a National EMS Culture of Safety**
- **National EMS Safety Summit**
- **EMS Safety Website and Resource Repositories**
  - NHTSA Safety Resources
  - NAEMT Safety Resources
  - NAEMT Infectious Disease Resources
- **Safety Studies and National Reports/Guidance**
  - USFA EMS Safety Practices
  - NHTSA Lights and Sirens Use By EMS
  - NETEC EMS Model Procedural Guidelines for Special Pathogens
  - NASEMSO Fatigue in EMS Project
- **Safety Courses**
  - NAEMT EMS Safety Course
  - NAEMT EMS Safety Officer Course
  - NAEMT EMS Vehicle Operator Safety Course
- **EMS Fitness**
  - ACE Task Performance and Health Improvement Recommendations For Emergency Medical Service Practitioners
- **Mental Health Resources and Courses**
  - NAEMT Mental Health Resiliency Officer Course
  - IAFF Center of Excellence for Behavioral Health Treatment and Recovery
• Violence Against EMS Practitioners Reports, Reporting Systems and Courses
  o Drexel’s School of Public Health Stress and Violence in fire-based EMS Responders (SAVER)
  o IAFF’s Workplace Violence Course
  o Violence in Paramedicine Research Group
  o NAEMT Violence Against EMS Practitioners National Survey Report

• National Safety in EMS Awards
  o NAEMT-ACEP Safety in EMS Award

Integrated National Data Collection System - Expansion and Promotion of NEISS-Work
NAEMT strongly proposes for OSHA to lead an effort, working with its federal partners (NIOSH, NHTSA OEMS, and USFA) to further support and fund a more comprehensive collection of EMS occupational safety and health data for public access and reporting, mandate EMS data integrity and transparency, and continuously engage a diverse group of EMS stakeholders to enhance the data collection.

We commend the joint effort between NIOSH and NHTSA’s Office of EMS to collect EMS occupational injury data through the National Electronic Injury Surveillance System (NEISS-Work) but it requires greater transparency and promotion of its existence, expansion of EMS demographic data collection, and validation of its data sets. The data system results are based upon a national probability-based sample of data collected in U.S. hospital emergency departments, yet the sample size is not identified. In addition, the data would be more effective and useful if expanded to display injuries per type of practitioner (EMT, AEMT, Paramedic), by delivery mode (Fire-based, for-profit, non-profit, public, etc.), by type of service (ground, air, etc.) and other demographics that are outlined in the 2020 National EMS Assessment.

Per the CDC’s website, “NIOSH uses employed labor force data obtained from the U.S. Bureau of Labor Statistics’ Current Population Survey with the number of injuries to calculate "national rate estimates" of injuries per full-time equivalent worker.” EMS workforce data collection through CPS is currently incorrect and is creating an erroneous national rate estimate on the number of injuries per full-time EMS workers. NAEMT and its other national EMS and Fire partners have introduced legislation (S. 1115 and H.R. 2574, the EMS Counts Act) with Senator Casey (D-PA) and Representative Wild (D-PA-7) and our working with the Department of Labor to obtain an accurate count of the EMS workforce. Currently, no single data repository exists to identify how many individuals comprise the EMS workforce in the United States. In 2016, EMS workforce estimates reported within federal publications ranged from 196,880 to 826,111. The 2020 National EMS Assessment estimates over 1 million EMS practitioners. The BLS data demonstrates an extreme undercounting of the EMS workforce because it does not include firefighters, who also work as credentialed EMTs and paramedics within their fire departments. Approximately 40% of all emergency medical services are provided via fire departments, resulting in a severe underreporting of the number of individuals providing EMS as part of their job duties. The BLS data also fails to count EMS volunteers, who represent a significant proportion of the EMS workforce in rural EMS systems across the country and in many communities in states on the East Coast of the U.S.

Federal Funding for EMS Occupational Safety and Wellness Research
NAEMT strongly advocates for federally initiated and funded EMS occupational safety and wellness research focused solely on the activities and protocols of EMS delivering patient care. EMS requires
comprehensive, coordinated national research on occupational safety and health. In addition, OSHA should establish and directly fund occupational safety and health pilot programs, capturing best practices and lessons learned, and identifying operational and economic challenges across a diverse subset of EMS agency delivery models. The evidence from the pilot project combined with the research can better lend to OSHA offering nationwide guidance on EMS occupational safety and health.

NAEMT appreciates OSHA’s consideration of our feedback on its proposed emergency response rulemaking. We look forward to engaging in further discussions on EMS occupational safety and health and assisting the Administration in meeting its mission to ensure safe and healthy working conditions for all American workers, especially our nation’s emergency responders. If you need additional information and/or would like to further discuss our comments and recommendations, please feel free to contact us at advocacy@naemt.org.

Very Respectfully,
NAEMT Board of Directors