March 19, 2020

U.S. Senate
Washington, DC 20510

Dear Senator:

On behalf of the National Volunteer Fire Council (NVFC), which represents the nation’s volunteer fire, EMS, and rescue services, I am writing to make you aware of the challenges that volunteer responders face related to the outbreak of COVID-19 and ask for your help in addressing them.

According to data from the National Fire Protection Association’s (NFPA) 2018 U.S. Fire Department Profile report, there are more than 24,000 all- and mostly-volunteer fire departments protecting more than 80 percent of communities and approximately 32 percent of the population across the country. Volunteer emergency responders serve communities of all sizes but are most commonly depended on in rural areas. For example, according to the NFPA’s report, 647,100 volunteer firefighters serve fire departments protecting communities with populations of 10,000 or fewer residents, compared with just 63,300 career firefighters employed by those departments.

Many of the challenges that all- and mostly-volunteer fire, EMS, and rescue departments face related to the outbreak of COVID-19 are the same as those faced by agencies with career staff. Our members are very concerned about shortages of personal protective equipment (PPE), including N95/100 masks, gowns, gloves, and goggles. The Centers for Disease Control and Prevention (CDC) have issued guidance recommending reuse of N95/100 masks when feasible, using lower-rated masks, or just using a face shield with no mask in order to help departments maximize protective measures in the face of shortages. Many emergency response agencies are being told by suppliers that re-supply orders will not be fulfilled. We have also heard that hospitals and nursing homes are being prioritized over public safety for access to state and national stockpiles of supplies.

Lack of access to testing is also a significant problem. In some states it takes about a week to get the results of a COVID-19 test back, and we’ve heard accounts of responders not being eligible for testing until/unless they develop symptoms, even after an exposure occurred. Consequently, it is likely that there are responders under quarantine who don’t need to be at the same time that personnel who have the virus but are asymptomatic continue to respond. Better access to testing is critical to solving this serious problem.

Personnel being subject to quarantine presents unique challenges for volunteer emergency responders and the agencies that they serve. From an operational standpoint, having personnel in quarantine reduces available staffing at a time when many agencies are already struggling to keep up with heightened call volumes. For the responders themselves, going into quarantine often means going home and exposing their families. At the same time, for volunteers it can mean not being able to go to their paid job, resulting in loss of pay or even loss of employment, which could in turn lead to loss of health insurance for them and their families.

Many volunteer firefighters and EMS and rescue personnel are employed as emergency responders for a different department and then volunteer in their home communities when they are off-duty. As career public safety agencies experience high demand for services coupled with personnel being placed into quarantine, the need for paid staff to
work overtime is likely to increase. This will lead to reduced staffing capacity for many volunteer emergency services agencies even if they have not yet experienced an outbreak of COVID-19 locally.

To be clear, the challenges described above are anecdotal and are not, to my knowledge, currently causing widespread disruption or creating breakdowns in the ability of volunteer fire, EMS, and rescue departments to maintain operations. With that said, as COVID-19 continues to spread it is possible and perhaps even likely that in the coming days and weeks, without a significant intervention, we will find that many of these problems become debilitating for agencies in thousands of communities across the country.

With that in mind, I ask that Congress take the following steps to protect our nation’s firefighters and EMS and rescue personnel and ensure continuity of operations for emergency services agencies across the country:

1) Take such measures as may be necessary to significantly increase the production and distribution of PPE, including N95/100 masks, gloves, gowns, and face shields to health care service providers and emergency responders alike.
2) Increase access to testing and reduce wait times for results for emergency responders so that they can be released from or entered into quarantine, as appropriate, based on scientific evidence in as short a timeframe as possible.
3) Ensure that volunteer emergency responders and their families have access to testing and treatment, as necessary, for COVID-19 even if they do not have health insurance.
4) Ensure that volunteer emergency responders do not experience a loss of income or employment due to responding and/or having to enter quarantine because of a service-related exposure.

Regarding items 1 and 2, it is important that PPE production and testing capabilities are expanded enough to ensure access for rural emergency services agencies, in addition to those located in urban centers where COVID-19 outbreaks are starting to be documented. Community spread is going on throughout the nation, including in rural America, and we need enough PPE and testing to reach communities of all sizes.

Additionally, as it relates to items 3 and 4, robust policy actions to protect the health and material well-being of the public in general are likely to have a significant, positive impact on the ability and willingness of America’s approximately one million volunteer emergency responders to continue to provide services in the face of this outbreak.

You are welcome to contact me directly, or Dave Finger, Chief of Legislative and Regulatory Affairs (dave@nvfc.org, (202) 887-5700) if you have any questions about this request. I look forward to working with you to address the critical challenges facing our country and the nation’s emergency services.

Sincerely,

Steven W. Hirsch, Chair