

Rural Emergency Medical Services

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SPECIAL REPORT

**RURAL
EMERGENCY
MEDICAL
SERVICES**

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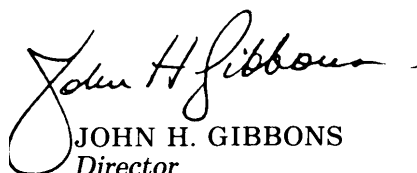
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Foreword

The problems of health care in rural areas have long occupied a special niche in policies designed to advance the Nation's health. Programs for recruitment, training, and deployment of health care personnel, for constructing health care facilities, and for financing health care, often have included special provisions for rural areas. These programs have often also included attempts to mitigate the negative impacts on rural areas of policies primarily designed for and responsive to the needs of urban areas. However, some rural areas continue to have high numbers of hospital closures, ongoing problems in recruiting and retaining health personnel, and difficulty in providing medical technologies commonly available in urban areas. Mounting concerns related to rural residents' access to health care prompted the Senate Rural Health Caucus to request that OTA conduct an assessment of these and related issues. The first OTA paper prepared in connection with this assessment, *Defining "Rural" Areas: Impacts on Health Care Policy and Research*, was published in July 1989.

This Special Report, *Rural Emergency Medical Services*, is the second paper prepared in connection with that assessment. This report finds that many State EMS systems are fragmented and lacking resources to remedy EMS problems in rural areas. Many rural EMS programs lack specialized EMS providers, have inadequate EMS transportation and communications equipment, and are not part of a planned regional EMS system. The report describes the availability and distribution of emergency medical service (EMS) resources (e.g., personnel, transportation, facilities) and examines how limited Federal resources can be used to improve rural EMS. In addition, the report discusses how Federal EMS resources might be targeted to States' rural areas.

This report is based, in part, on a May 1989 Rural EMS Workshop that was cosponsored by the Department of Transportation. Valuable guidance was provided by an advisory panel, chaired by Mr. James Bernstein of the North Carolina Department of Human Resources. A number of other experts also provided information and reviewed a draft of the report. The final responsibility for the content of this report rests with OTA. Maria Hewitt was the primary author of this study.



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NOTE: OTA appreciates and is grateful for the valuable assistance and thoughtful critiques provided by the advisory panel members. The panel does not, however, necessarily approve, disapprove, or endorse this report. OTA assumes full responsibility for the report and the accuracy of its contents.

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