

Field Hearing of the US Senate Budget Committee
20 Feb 2007
Room 201 Fargodome
Fargo North Dakota 58102

Testimony of Kenneth G. Habiger NREMT-B
Casselton Volunteer Ambulance Service
Casselton, North Dakota

Senator Conrad, Members of the Committee, Honored Guests, Ladies and Gentlemen:

Thank you for allowing me to testify before you this afternoon. My name is Kenneth Habiger. I am the President of the Casselton Volunteer Ambulance Service in Casselton North Dakota and also a former Casselton fireman. I have been an Emergency Medical Technician since we started the Casselton Volunteer Ambulance Service in 1978. I am here today to represent the emergency service providers in the state of North Dakota, many of whom are volunteers. I have been involved with ambulance services starting at a very early age when funeral homes provided this service and have been part of the evolution of ambulance services to be the professional health care providers they are today.

Our service along with 3 other volunteer BLS (Basic Life Support) services and Fargo-Moorhead ALS (Advanced Life Support) service provide emergency medical services throughout Cass County, where the main railroad freight line and 2 interstate highways cross.

We operate under medical direction in a tiered response system starting with 911 dispatch, first responders, moving up into BLS and ALS ambulance services, Lifeflight, police and fire departments.

Our main support system in North Dakota starts with the North Dakota Department of Health EMS (Emergency Medical Services) and moves down through the county government and the county Emergency Manager.

The reason we are here today is our concern for cutbacks in funding through the President's budget which may cause our inability to fill all of our needs that Homeland Security and other agencies require and mandate of ambulance services in the field of preparedness.

EMS gets a small portion of Homeland Security and other sources of funding. In Cass County, I sit on the Cass-Fargo Emergency Planning Committee that assists in identifying concepts of preparedness, prevention, mitigation, response, and recovery from natural and man-made disasters. Nationally, EMS funding is around 4% of the money made available. EMS also has a difficult time getting on national boards and on down that are involved in the planning and funding of EMS. These findings were the result of a large number of participants from the EMS and medical community through a study done through New York University Center for Catastrophe Preparedness and Response. EMS is part of what is called "The Forgotten 1st Responder".

The funding we have been able to access provided us a new interoperable digital radio system and soon to come digital paging system.

This still leaves us short in funding for equipment even with help from the North Dakota Department of Health EMS. We are unable to fully implement the North Dakota Regional Response Plan for our services.

Statistics show the population of North Dakota is aging. We see funding for this aging population cut through the President's budget. We also see beneficial programs like EMS-C (Emergency Medical Services for Children) and many other programs suffering drastic cuts.

Across the nation, every state is dealing with a looming crisis to attract volunteers to its services. I believe the last figures that were presented showed that in the 1980s the average volunteer ambulance squad had more than 35 volunteer members. Today, that figure is down to 12 members.

I thank you for allowing me to be here today. We are grateful for the support and funding we have received, but realize we have a long way to go to move up from that 4% figure of funding.