



**Grant Programs Directorate Information Bulletin
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TO: All State Administrative Agency Heads
All State Administrative Agency Points of Contact
All Core City/Core County Points of Contact
All State Homeland Security Directors
All State Emergency Management Agency Directors

FROM: W. Ross Ashley, III
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Federal Emergency Management Agency

SUBJECT: Inclusion of emergency medical services and other responder disciplines
as part of the FY 2008 Homeland Security Grant Program processes

The *Consolidated Appropriations Act of 2008* (Public Law No: 110-161) (hereafter “the Act”) requires FEMA to include in its grant guidance language which requires State and local governments to include emergency medical services (EMS) providers in their Statewide and Urban Area homeland security plans. In accordance with this requirement, and as States, Territories, localities, and tribes continue to work towards completion of their application materials for the FY 2008 Homeland Security Grant Program (HSGP), FEMA would like to remind our homeland security partners of the importance for proactive inclusion of various State, regional, and local response disciplines who have important roles and responsibilities in prevention, deterrence, protection, and response activities. Inclusion should take place with respect to planning, organization, equipment, training, and exercise efforts. Response disciplines include but are not limited to: governmental and nongovernmental emergency medical, firefighting, and law enforcement services; public health; hospitals; emergency management; hazardous materials; public safety communications; public works; and governmental leadership and administration personnel.

FEMA’s Grants Reporting Tool will continue to be utilized for grantees to input and for FEMA to track, on a biannual basis, homeland security funding provided to response disciplines. In accordance with the Act, if no state or local funding is provided to EMS, the state should justify the lack of funding through demonstrating that related target capabilities have been met or identify other pressing priorities.

Homeland security partners should examine how they integrate preparedness activities across disciplines, agencies, and levels of government, including State, Territory, local, and tribal units of government. A cohesive planning framework should be incorporated that builds and

implements homeland security initiatives which leverage DHS resources, as well as other Federal, State, Territory, local, and tribal resources. Specific attention should be paid to how all available preparedness funding sources can be effectively utilized in a collaborative manner to support the enhancement of capabilities.

The FY 2008 HSGP re-emphasizes the importance of creating or utilizing existing governing bodies to act on this guidance and coordinate grant resources. Examples include: State Senior Advisory Committees, Urban Area Working Groups, Area Maritime Security Committees, Citizen Corps Councils, and Metropolitan Medical Response System Steering Committees. As a reminder, the membership of the Senior Advisory Committee must, at a minimum, include the following State officials directly responsible for the administration of GPD grants and Centers for Disease Control and Prevention (CDC) and Health Resources and Services Administration (HRSA) cooperative agreements: the State Administrative Agency (SAA), HRSA Bioterrorism Hospital Preparedness Program Coordinator, and CDC Public Health Emergency Preparedness Program Director. In addition, program representatives from the following entities should be members of the committee: State Homeland Security Advisor (if this role is not also the SAA); State Emergency Management Agency Director; State Public Health Officer; State Public Safety Officer (and SAA for Justice Assistance Grants, if different); State Court Official; State EMS Director; State Trauma System Manager; State Citizen Corps POC; Urban Area POC; United States Coast Guard Area Command or Captain of the Port; Senior Members of the Regional Transit Security Working Group; Senior Security Officials from Major Transportation Systems; and the Adjutant General.

Additional questions regarding the intent, scope, and allowability of HSGP funds and expenditures may be directed to your GPD Program Analyst or the Centralized Scheduling and Information Desk at askcsid@dhs.gov or 1-800-368-6498.