

The Time is Now!

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It has been a full decade since the federal initiative to develop comprehensive EMS systems throughout the United States was folded quietly into President Ronald Reagan's block grant strategy. In 1986, the General Accounting Office (GAO) studied the impacts of the change in several states and found that the results varied considerably. In some states, EMS had thrived with local initiatives, which more than replaced any lost federal support. In others, EMS Systems had deteriorated badly. The GAO report pointed out enormous structural problems in communications, citizen access, training availability, inconsistency in the service level provided from community to community, and in the lack of trauma care systems development.

In 1987, a new federal trauma care systems legislative effort was initiated. Partially in response to the GAO study, and mostly as a reaction to the closing of trauma centers in urban California and Florida, Representative Jim Bates (D-Florida), in the House of Representatives, and Senator Alan Cranston (D-California), in the Upper Chamber, introduced separate versions of legislation to provide incentives and guidance to states to develop and partially fund trauma care systems. After two years of consensus building among various medical and advocacy groups, negotiating, educating, and lobbying, the House version passed but the Senate version died on the floor in the waning days of the session.

As the new session opened in 1989, both bills were reintroduced quickly and the process started again. This time the negotiating has been more successful and, at this point, the House Bill (H.R. 1602) once again has passed and the Senate Bill (S. 15) is awaiting a vote by the full Senate. For comparative details of the two bills, see the paper (page 255) in this issue of *Prehospital and Disaster Medicine*.

Those of us with an interest in improving the status of trauma care systems in the United States have less than six months to help forge a compromise or "conference" bill and work to get it passed again in *both* the House and Senate. Once that is accomplished, there comes the uphill task of seeking an appropriation to actually fund the programs authorized by the new trauma legislation. Finally, we must ensure that the Bush Administration appreciates the importance of this effort and will sign it into law.

All of this will not happen without a widespread and strong show of clear support. Citizen and expert input can drive the political process and make the difference between competing interests. If trauma is to gain recognition as a national priority, we all must get involved. If it is to happen in the near future, *the time for your action is now!* Write, call, or visit with your Senators and Representatives. Let them know that H.R. 1602 and S. 15 will help save lives and reduce the overwhelming toll from injuries in their communities. Please, join the National Association of State EMS Directors in letting your voice be heard.

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