AN ACT to amend the criminal procedure law, in relation to designating tactical medical providers employed by a municipal police department as peace officers

The New York State Association of County Health Officials (NYSACHO) supports the above-referenced legislation, which amends NY CPL 2.10 and creates the new peace officer classification - Tactical Emergency Medical Support (TEMS) Officer or Tactical Medical Provider. Such provider would be a licensed physician, paramedic, or emergency medical technician, recruited by the head of a police department or sheriff to be deployed with a SWAT team and in performance of their duties, to be defined as a peace officer.

NYSACHO represents all 58 local health departments in New York State. Our members work with law enforcement, hospitals and other first responders to respond to a wide variety of manmade and natural disasters and acts of terrorism, including active shooting incidents, such as the April 2009 shooting at the American Civic Association Center in Binghamton New York where the Broome County Health Department provided translation services to assist in communications with victims and their families.

Active shootings are a real concern in our society. Current studies based on active shootings show that limiting or excluding unarmed EMS response for injured persons within a Warm/Hot zone significantly decreases the chance of victim’s survival. The responding law enforcement officer making the initial entry in these scenarios has the job of stopping the active killing not saving the injured and hemorrhaging victim. In states where trained medical professionals are armed and allowed to move with teams to the point of a Warm/Hot Zone, the survival rate is significantly increased. The National Tactical Officers Association (NTOA), in its Tactical Emergency Medical Support (TEMS) position statement, states that:

“The NTOA recommends that special operations teams (SWAT, SERT, etc), include properly trained tactical emergency medical providers. These TEMS providers are capable of developing medical threat assessments, implementing risk reduction strategies, providing logistical support, coordinating operations with local emergency medical services (EMS) and rendering immediate medical care within the tactical environment of a law enforcement operation.”

In December of 2015, in an act of terrorism and workplace violence, a co-worker and his spouse attacked employees of the San Bernardino Environmental Health Department during a training event. A trained fire department medic who was part of a local law enforcement SWAT team was able to enter the active scene and triage victims inside the building. According to a post-shooting critical incident review, his efforts “significantly enhanced victim extrication and survival.” This legislation may mean the difference between life and death in active shooting situations for civilian victims and injured first responders. NYSACHO therefore supports the immediate passage of S.1851/A458-A.

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