

# Durbin, Duckworth Announce Nearly \$519,000 In Funding For Rural EMS Agencies

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WASHINGTON – U.S. Senate Majority Whip Dick Durbin (D-IL) and U.S. Senator Tammy Duckworth (D-IL) today announced \$518,916 in funding for several rural fires and emergency medical services (EMS) agencies in Illinois. The funding, which was created through Durbin’s *Supporting and Improving Rural EMS Needs (SIREN) Act*, will go toward supporting EMS agencies in training and recruiting staff, conducting certification courses, and purchasing equipment.

“Across Illinois, rural EMS agencies are first on the scene to respond to community emergencies, the opioid crisis, and the COVID-19 pandemic. But for EMTs to properly respond to these emergencies, we must ensure they are equipped with the necessary supplies, training, and steady funding to support their operations,” said Durbin. “I worked hard to pass the *SIREN Act* to meet the needs of EMS agencies as they care for their communities. I hope to see today’s grant recipients put this federal funding to good use.”

“EMS agencies that serve rural parts of Illinois are often lifelines in times of emergencies and these first responders have been on the frontlines during the COVID-19 pandemic,” said Duckworth. “I’m proud to help announce these resources to help ensure that the agencies administering these crucial services have the equipment, staff, and resources they need to continue serving their communities.”

Under this announcement, these agencies will receive the following grant amounts:

- Jersey Community Hospital District: \$193,453
- Amboy Ambulance & Fire Protection District: \$125,463
- Gibson Area Hospital & Health Services: \$200,000

Durbin’s bipartisan *SIREN Act* was signed into law in 2018 as part of the Farm Bill. Durbin secured a \$2 million increase in the Fiscal Year 2022 Omnibus Appropriations Bill, for a total of \$7.5 million, for *SIREN Act* grants to rural fire and EMS agencies nationwide.

A decline in primary care and hospital service availability, great distances between health care facilities, and low insurance reimbursement for transport and emergency treatment have all strained rural EMS agencies. At the same time, EMS agencies today are tasked with ever-greater responsibilities—addressing the COVID-19 pandemic, preparing for natural and manmade disasters and bioterror threats, supporting the chronic and emergency care needs of an aging population, and responding on the front lines of the opioid epidemic. These first responders are often the only health care providers in their area and face difficulty in personnel recruitment and retention, and securing expensive equipment.